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Certified Copies	Certificates of Status
Special Instruction	ns to Filing Officer:
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COVER LETTER

TO:	Registration of	on Section f Corporations	•	
CUD IE		PERTIES LLC		•
SUBJEC	LI:	Name of L	imited Liability Company	
The encl	losed Article	es of Amendment and fee(s) are s	submitted for filing.	
Please re	eturn all cor	rrespondence concerning this mate	ter to the following:	
		Valerie Anderson		
			Name of Person	
		7 Properties LLC		
			Firm/Company	
		2800 S. Adams Street, #	95184	
			Address	· · · · · · · · · · · · · · · · · · ·
		Tallahassee, FL 32314		
			City/State and Zip Code	
		valanderson2020@gmail	.com s: (to be used for future annual report)	
For furth	ner informat	tion concerning this matter, please	•	iouncation)
Valerie .	Anderson		813 285-8165	
Name of Person		ame of Person		time Telephone Number
Enclosed	d is a check	for the following amount:		
■ \$25.	.00 Filing F	Fee ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Ac		Street Address	
	_	tion Section of Corporations	Registration Division of O	
	P.O. Box	-		f Tallahassee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/ Properties LLC		
(<u>Name of the Limited Liability Company as it n</u> (A Florida Limited Liability C	ow appears on our records.) Company)	
he Articles of Organization for this Limited Liability Company were fill orida document number L21000356981	led on 8/8/2021	_ and assigned
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability cor	npany here:	
ne new name must be distinguishable and contain the words "Limited Liability Comp	vany," the designation "LLC" or the abbre	viation "L.L.C."
nter new principal offices address, if applicable:		- :-u
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	<u>022</u>
	, " .* *1•,	
	:	1 ,
nter new mailing address, if applicable:		2379
Aailing address MAY BE A POST OFFICE BOX)	•	. · · · · · · · · · · · · · · · · · · ·
		1/2) 1/2**
. If amending the registered agent and/or registered office address ent and/or the new registered office address here:	on our records, enter the name o	f the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
Cin	,	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Valerie Anderson	2800 S. Adams Street, #5184, Tallahassee, FL 32314	} ≣ Add
			□ Remove
			Change
MGR	Valerie Anderson	2800 S. Adams Street, #5184, Tallahassee, FL 32314	} ≣Add
			□Remove
			Change Change Add
			Remove
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ctive date, if other than the date of filing:effective date is listed, the date must be specific and cannot be p	sias to data of filis	a as more than 00 de	(optional)	Dumment to 605 01
e: If the date inserted in this block does not meet the ap	plicable statutory			
ument's effective date on the Department of State's reco	rds.			
cord specifies a delayed effective date, but not an effective	re time, at 12:01	a.m. on the earlie	rof:(b) The	90th day after th
filed.			(-)	
August 30 2021				
ed August 30 , 2021	•			
, / A				
Vallue Ande Signature of a member or a	100			

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