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| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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| Certified Copies Certificates of Status | | | | |

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COVER LETTER

| CUDICAT. | FF SPV Fu | nd 7 LLC | | |
|--------------------|---------------|--|---|---|
| SUBJECT: | | Name of Lim | ited Liability Company | |
| The enclosed | Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return | all correspo | ondence concerning this matter | to the following: | |
| | | Kristen Akel | | |
| | | | Name of Person | |
| | | Florida Funders, LLC | | |
| Division of Co | | | Firm/Company | |
| | | 1311 N Westshore Blvd. S | uite 101 | |
| | | | Address | |
| | | Tampa, Fl. 33607 | | |
| | | legal@floridafunders.com | City/State and Zip Code | |
| For further in | nformation c | e-mail address: (| to be used for future annual report not all: | (theation) |
| Kristen Akel | | | 813 5081023 | |
| | Name o | f Person | at () Area Code Daytin | ne Telephone Number |
| Enclosed is a | check for the | ne following amount: | | |
| ■ \$25.00 F | iling 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) |
| Reg | gistration S | Section | <u>Street Address:</u> Registration So | |
| | | | Division of Co The Centre of | |

Tallahassee, FL 32314

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| FF SPV Fund 7 LLC | | |
|---|---|------------------------------------|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | any as it now appears on our reco Liability Company) | ords.) |
| The Articles of Organization for this Limited Liability Compan | y were filed on 2/8/2023 | and assigned |
| Florida document number L23000071948 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | |
| FF XGen Fund 2 LLC | | |
| The new name must be distinguishable and contain the words "Limited Liab | oility Company," the designation "L | .LC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | <u> </u> |
| | | 123 M |
| | | A TI |
| Enter new mailing address, if applicable: | | 三 |
| (Mailing address MAY BE A POST OFFICE BOX) | | SSE TO |
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| | | 30 |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, ent | ter the name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street ada | lress |
| | | Florida |
| | City | 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 Changing Registered Agent, Signature of New Registered Agent

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> | Name | Address | Type of Action |
|--------------|------|---|--------------------|
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| (If an effec <u>Note:</u> H | we date, if other than the date of filing: | |
| rd is file | | the |
| Dated _ | 3/7/23 Tan S Warn Signature of a member or authorized representative of a member | |
| | F Chan | |
| | Signature of a member or authorized representative of a member | |
| | digitative of a member of authorized representative of a member | |

Filing Fee: \$25.00