

L24000155755

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(Address)

(Address)

(City/State/Zip/Phone #)

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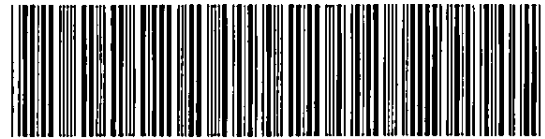
(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEVENFOUR, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHELLE RAMIREZ

Name of Person

Firm/Company

101 S East Coast St. Apt. 717

Address

Lake Worth Beach, Florida, 33460

City/State and Zip Code

mr1220@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lewis Carbuccia

786

226-5284

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Changing Registered Agent. Signature of Non-Registered Agent

• • •

N/A

(1) If the document filed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date of filing on the Department of State's records.

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S. J. F. Mj

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