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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALL7 SERVICE LLC Account Number : I20240000077 : (407)970-8143 Phone Fax Number : (689)218-0977

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			 	 	 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SEVEN PLUS COMPANY LLC

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Help

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEVEN PLUS COMPANY LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our recor (ted Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Comp  Florida document number <u>L24000208288</u> .	any were filed on 05/03/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
SEVEN PLUS SERVICES LLC		
The new name must be distinguishable and contain the words "Limited L	.:ability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS	<u> </u>	<b>2</b>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	N/A	ZFEB -3
3. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, <u>ente</u>	r the name of the ew regist
Name of New Registered Agent: N/A		
New Registered Office Address:	Enter Florida street addre	.22
	T .	lorida
	Cay	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.

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager		
AMBR = Authorized Member		

Title	<u>Name</u>	Address	Type of Action
		N/A	Add
			□Remove
			□Change
		<u> </u>	□Add
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ecti	ve date, if other than the date of filing:
effe	etive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
	ent's effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s file	ad.
. 1	Orlando, FL 2nd February of 2025
.ca _	Orlando, FL 2nd February of 2025
	Signature of a member or authorized representative of a member
	$\Lambda$

Filing Fee: \$25.00