

8/25/22, 2:54 PM

Division of Corporations

L12000010599
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LAW OFFICES OF PAUL R. SASSO
Account Number : I20170000049
Phone : (305)234-2586
Fax Number : (305)234-2584

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

Email Address: paul@sassolawgroup.com

2022 AUG 25 PM 3:30

SECRETARY OF STATE
PAUL SASSO ESQ
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ZRI, L.L.C.

Certificate of Status	0
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AUG 26 2022

PAUL SASSO ESQ

H220002883693
COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZRI, L.L.C.
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:

PAUL R. SASSO, ESQUIRE
Name of Person
LAW OFFICES OF PAUL R. SASSO, ESQUIRE.
Firm/Company
12372 S.W. 82nd Avenue
Address
Pinecrest, FL 33156
City/State and Zip Code
paul@sassolawgroup.com
E-mail address: (to be used for future annual report notification)

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CLERK OF STATE
TALLHASSEE, FLORIDA

For further information concerning this matter, please call:

Name of Person at () 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

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#220002883693
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ZRI, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JANUARY 23, 2012 and assigned Florida document number L12000010599

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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COUNTY CLAY
STATE OF FLORIDA

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

Enter Florida street address

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

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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>	<u>Type of Action</u>
MGR	Gustavo Adolfo Rodriguez Guzman	12372 S.W. 82nd Avenue, Pinecrest, FL 33156	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Olga Lucia Rodriguez Guzman	12372 S.W. 82nd Avenue, Pinecrest, FL 33156	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Multiple horizontal lines for amending information.

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SECRETARY OF STATE
OFFICE OF THE CLERK

FILED

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 8-25-22

Handwritten signatures of Gustavo Adolfo Rodriguez Guzman and Olga Lucia Rodriguez Guzman.

GUSTAVO ADOLFO RODRIGUEZ GUZMAN OLGA LUCIA RODRIGUEZ GUZMAN

Typed or printed name of signee

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