

U13000094285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

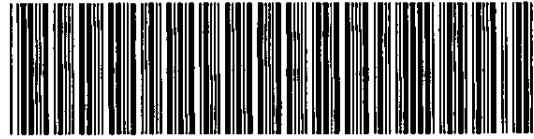
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Zoom Credit Repair 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:

**Evens Lauredant**

Name of Person

**Zoom Credit Repair LLC**

Firm/Company

**840 E Oakland Park BLVD Suite 118**

Address

**Oakland Park , Florida 33334**

City/State and Zip Code

**zoomcrepair@gmail.com**

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

For further information concerning this matter, please call:

**Evens Lauredant**

Name of Person

at **954 533-2685**

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 enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**Zoom Credit Repair LLC**

(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 07/02/2013 and assigned Florida document number L13000094285.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

840 E Oakland Park BLVD  
Suite 118  
Oakland Park FL 33334

Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

840 E Oakland Park BLVD  
Suite 118  
Oakland Park FL 33334

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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: Evens Lauredant

New Registered Office Address: 840 E Oakland Park BLVD Suite 118  
*Enter Florida street address*

Oakland Park, Florida 33334  
*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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Evens Lauredant	840 E Oakland Park BLVD	<input checked="" type="checkbox"/> Add
		Suite 114	<input type="checkbox"/> Remove
		Oakland Park FL 33334	
MGRM	Achelet Petit-Homme	731 NW 37th ST	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Oakland Park FL 33309	
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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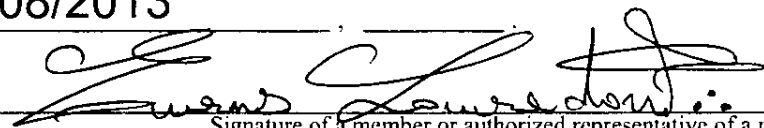
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Dated 07/08/2013



Signature of a member or authorized representative of a member

Evens Lauredant

Typed or printed name of signee

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Filing Fee: \$25.00

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