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TALLAHASSEE, FLORIDA

AUG 11 2018 S. YOUNG

COVER LETTER

	legistration Se livision of Cor		,					
SUBJECT		roup Holdings, LLC						
SUBJECT	·	Name of Lin	nited Liability Company	<u> </u>	— } — —			
The enclose	sed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please retu	ırn all correspo	ondence concerning this matter	to the following:		; !			
		Leon N. Patricios						
		•	Name of Person		· .			
		ZPW&B Group Holdings	, LLC		t.			
			Firm/Company		1	A A A	2	
		312 Minorca Ave			•	CNE	AUG	-11
			Address			ASS	,	
		Coral Gables, FL 33134			÷		7 P	.ED
			City/State and Zip C	ode			P	\mathcal{L}
		lpatricios@zpwlaw.com				STATE	5: 08	
		E-mail address: (to be used for future and	nual report notificati	on);	> '	Φ	
For further	r information c	oncerning this matter, please c	all:					
Leon N. P	atricios		305 at (444-5565				
	Name o	f Person .	. Area Code	Daytime Tel	ephone Number			
					,			
Enclosed is	s a check for th	ne following amount:	,		÷			
\$25.00) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing F Certified Copy (additional copy i	у	Certified	e of Status		
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	MAIL	ING ADDRESS:	CTD	EET/COURIER .	ADDDESS.			
		ration Section		stration Section	, VDAVE33!			
	Divisio	n of Corporations.	Divis	sion of Corporation	ns (
		ox 6327 assee, FL 32314	2661	on Building Executive Center	Circle			

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZI W&B Group Holdings, EEC			
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our ability Company)	<u>r >:ords.</u>)	
The Articles of Organization for this Limited Liability Company vi Florida document number L14000105615	vere filed on	4 ½ 	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:	1	
ZP&B Group Holdings, LLC		•	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	n "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	•		
	•		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			PAS P
			
			SE -7 E
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		 ;	> 0
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		ecords, ente	r the name of the new
Name of New Registered Agent:	·		
Addition to the togistered right.		. ,	
New Registered Office Address:		· 	
	Enter Florida stree	t address	
		, Florida _	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		•	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my dut covided for in Chapter	ies, and I am 605, F.S. Oi	familiar with and r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and acdress of each person being added or removed from our records:

. !

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
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: If the date inserted in this block	k does not meet the applicable statutory	filing requirements, th	is date will	not be listed
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