L22000037945

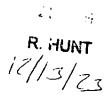
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COVER LETTER

TO: Registration Se Division of Cor			•		
Tulio Zuloz SUBJECT:	-				
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
	ndence concerning this matter				
	Tulio Jose Zuloaga				
		Name of Person			
		Firm/Company			
	2214 Curlew Rd				
		Address			
	Palm Harbor, FL 34683			2023 (
	tulio@tjzrealestate.com	City/State and Zip Code		2023 DEC 13 FM 12: 40	5
	E-mail address: (to be used for future annual report notific	cation)	ω ;	
For further information c	oncerning this matter, please ca	all:		FN 12: 40	
Tulio Jose Zuloaga		727 403-0985		t 0	
Name o	f Person	at () Area Code Daytime	Telephone Number		
Enclosed is a cheek for the	he 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 Addres Registration		Street Address: Registration Sect	tion		

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tulio Zuloaga 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 January 14, 2022 and assigned Florida document number L22000037945 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Tulio Jose Zuloaga LLC 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address _, Florida _

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 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>	Name	Address	Type of Action
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Note:	ve date, if other than the date of filing: (optional) (optional)	t to 605.0207 be listed as
e reco rd is f	l specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th da ed.	ay after the
	December 11 2023	
Dated		

Filing Fee: \$25.00