L21000403008

(I	Requestor's Name)		
(/	Address)		
	Address)		
(0	City/State/Zip/Phone #)		
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
(1	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions	to Filing Officer:		

Office Use Only



100374735911

10/15/21+-01009---010 **25.00

2021 OCT 15 PM 5: 10

OCT 25 2021

COVER LETTER

TO:

Registration Section Division of Corporations

	VESTMENTS LLC	
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please return all correspo	ondence concerning this matter	to the following:
	ALEX ZERPA	
		Name of Person
	ZERPA INVESTMENTS	LLC
		Firm/Company
	3585 Piazza Drive #203	
		Address
	Fort Myers Fl 33916	
		City/State and Zip Code
	zerpaalex@aol.com	; ~~
	E-mail address: (to be used for future annual report notification)
For further information c	oncerning this matter, please c	all: 954 261-0907
Alex Zerpa		
Name o	f Person	Area Code Daytime Telephone Number
Enclosed is a check for the	he following amount:	##:1 <u></u> ## 0
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration !		Street Address: Registration Section
Division of C	Corporations	Division of Corporations
P.O. Box 632 Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
i allallassee,	L F 777 L L	ZTIJ IN. MOMOC SHEEL SHILL OID

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZERPA INVESTMENTS LLC		
/ Yama of the I	imited Lighility	Company as it now an

appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{09/10/2021}{1}$ _____ and assigned Florida document number <u>L21000403008</u> 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 3585 Piazza Drive #203 Fort Myers Fl 33916 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 3585 Piazza Drive #203 Fort Myers Fl 33916 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 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

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>	Type of Action
MGR	ZERPA, ALEX	3585 Piazza Drive #203 Fort Myers Fl 33916	□Add
			□Remove
MGR	ZERPA, FABIAN	3585 Piazza Drive #203 Fort Myers Fl 33916	□Add
			□Remove
			= Change
			□Add
			Remove Remove CEC Office Grange
			S DAdd
			□ Kêmove □ □ □ □ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

		,					_
							_
							_
							-
							•
							-
							=
			<u> </u>				-
			 -				-
							_
			-				·.;
					j., .	i 	
					5.0		 .;
			_			က် <u>၊</u> —	- '163 -63
					; 1	- -	-
n effective date is l	other than the date of listed, the date must be specif	fic and cannot be prio		more than 90 days after			
cument's effecti	nserted in this block does we date on the Departmen	nt of State's records	š.				
ecord specifies a is filed.	delayed effective date, bu	ut not an effective t	iime, at 12:01 a.n	n. on the earlier of: (b) The 90th	day afte	er the
	BER 11th	2021					

Filing Fee: \$25.00