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SECRETARY OF STATE
TAIL MASSEE, FLORIDA

K.SALY EXAMINER SEP - 5 2013

COVER LETTER

TO: Registration Se Division of Co		,
SUBJECT:	ZAVI HOLDINGS LLC Name of Limited Liability Company	
	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all correspondent	ondence concerning this matter to the following:	
	; • • • • • • • • • • • • • • • • • • •	
	AVRAHAM ZEITOUNE	
	AVRAHAM ZEITOUNE Name of Person	
	ZAVI HOLDINGS 44 C	
	Firm/Company	
	PO BOX 223915 Address	
	Address	
	HOUYWOD, FL 33022-3915 City/State and Zip Code	
• • • •	·	
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please call:	
A, Z	EITOUNE at (954) 599 3554 of Person Area Code & Daytime Telephone Number	
Name o	of Person Area Code & Daytime Telephone Number	
Enclosed is a check for t	the following amount:	
\$25.00 Filing Fee	□\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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 _______ City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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>	Address	Type of Action
MGR	SHLOMO ZEITOUNE	3017 AVE P	Add
		BROOKLYN, N.Y 11234	Remove
			
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	2n G
	Signature of a member or authorized representative of a member AVRAHAM ZEITOUNE Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00