

L05000112725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

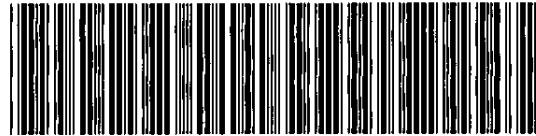
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
08 JUN 17 PM 1:40

**J. BRYAN**

JUN 19 2008

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** S & Z, 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:

Bev Garrett

(Name of Person)

Michael Wm Mead, P.A.

(Firm/Company)

24 Walter Martin Road

(Address)

Fort Walton Beach, FL 32548

(City/State and Zip Code)

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DIVISION OF CORPORATIONS  
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For further information concerning this matter, please call:

Bev Garrett at ( 850 ) 243-3135  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

April 24, 2008

**S & Z LLC**  
**309 MIRACLE STRIP PARKWAY**  
**FORT WALTON BEACH, FL 32548**

**SUBJECT: S&Z LLC**

**Ref. Number: L08000108141**

*405000 112 725*

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We have received your document for S&Z LLC and your check(s) totaling \$516.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 708A00024936

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

S & Z, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 11/15/2005 and assigned  
Florida document number L05000112725.

This amendment is submitted to amend the following:

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

S & Z 1, LLC

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:

N/A

**(Principal office address MUST BE A STREET ADDRESS)**

309 Miracle Strip Parkway

Fort Walton Beach, FL 32548

Enter new mailing address, if applicable:

(same as of record)

**(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:

N/A; same as of record

New Registered Office Address:

(Enter Florida street address)

\_\_\_\_\_, Florida

(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.*

N/A

(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

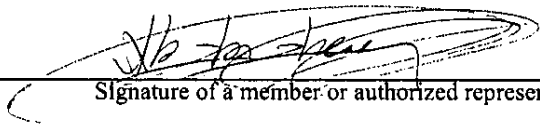
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ZHENG, Shun Zhu	309 Miracle Strip Parkway	<input type="checkbox"/> Add
		Fort Walton Beach, FL 32548	<input type="checkbox"/> Remove
	(to correct title, from MGR to MGRM)		
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Dated June 16, 2008

  
Signature of a member or authorized representative of a member

Shun Zhu Zheng

Typed or printed name of signee