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(Re	equestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI		A REALTY LLC		
SOBJI		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
		USLADYS ZARZUELA		
			Name of Person	
		ZARZUELA REALTY LI	.C.	
			Firm/Company	
		406 Columbia Court	Address	ATTARASSE 16 HAY 10
		Kissimmee Florida 34		
		Uzarzuela@gmail.com	•	
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information of	concerning this matter, please c	all:	
Uslad	ys Zarzuela		863 258-4618 at ()	
	Name o	of Person		Telephone Number
Enclos	sed is a check for t	he following amount:		
a \$2	5.00 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)
	MAIL	JNG ADDRESS:	STREET/COURIE	ER ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZARZUELA REALTY & SCHOOL LLC.		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records la Limited Liability Company)	<u>.)</u>
The Articles of Organization for this Limited Liability (Company were filed on 12/19/2006	and assigned
Florida document number L06000120496	<u> </u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
ZARZUELA REALTY LLC.		
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC"	man to the second of the secon
Enter new principal offices address, if applicable:		S 58
(Principal office address MUST BE A STREET ADD	RESS)	
		- Fr
Enter new mailing address, if applicable:		نوبر البيار مي المي المي المي المي المي المي المي ا
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	,
		orida
	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 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>	Address	Type of Action
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			☐ Change
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(If an eff	ive date, if other than the date of filing: [coptional] fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed then the seffective date on the Department of State's records.	207 (3) as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
Dated	April 29 Signature of a member or authorized representative of a member	
	USLADYS ZARZUELA	
	Obs. D. Obs. D. D. C.	

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Filing Fee: \$25.00