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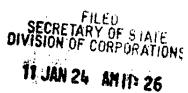
TO: Registration Section Division of Corporations					
SUBJECT:	Zaphones LLC Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are submitted for filing.				
Please return all correspondence	ondence concerning this matter to the following:				
	Ryan Caruallo Name of Person				
	Zaphones LLC Firm/Company				
	767 westlake od Address				
	Palm Harbor Fl 34684 City/State and Zip Code				
	E-mail address: (to be used for future annual report notification)				
For further information c	oncerning this matter, please call:				
Ryan C Name o	f Person at (727) 858 9744  Area Code & Daytime Telephone Number				
Enclosed is a check for the	to Callegraine and country				
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  S60.00 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



Zaphones LLC	`	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our r iability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	√20 N and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the do	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	267 West	lake rd
(Principal office address MUST BE A STREET ADDRESS)	267 West Pala Harbo	or FI
	34684	
Enter new mailing address, if applicable:	267 West	lake rd
(Mailing address MAY BE A POST OFFICE BOX)	Palm Harbo	r FI
	34684	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
·	Enter Florid	a street address
<del> </del>		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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	<b>Type of Action</b>
MGR	Ryan Carvallo	767 Westlate Rd Palm Harbor F1 34684	⊠ Add Remove
MGR	Bothany Caruallo	267 westlake Rd Palm Harbor Fl 34684	Add Remove
			Add Remove
			Add Remove
			Add Remove
·			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	SECRETAR DIVISION OF I
			CORPORATION
Dated		·	74
	• -	ar or authorized representative of a member なつしなしの d or printed name of signee	

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Filing Fee: \$25.00