## 1000039683

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JUN 28 2012

**EXAMINER** 



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## **COVER LETTER**.

	Registration Sect Division of Corpo						
SUBJEC	et:						
		Name of Lim	ited Liability Company				
The enclo	osed Articles of A	mendment and fee(s) are sul	bmitted for filing.				
Please re	turn all correspond	dence concerning this matter	r to the following:				
			ULISES LEDAIN				
			Name of Person				
			Firm/Company				
		203					
		MIAMI FL 33180  City/State and Zip Code					
		E-mail address: (	TAVO384@GMAIL.COM to be used for future annual report notif	ication)			
For further	er information cor	ncerning this matter, please of	eall:				
	ULIS	ES LEDAIN	at ( 305 )	804-6722			
	Name of F	Person		e Telephone Number			
Enclosed	is a check for the	following amount:					
\$25.00	0 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)			
MAILING ADDRESS: Registration Section		STREET/COURI Registration Section					

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ZONDA TF						
( <u>Name of the Limite</u>	d Liability Compa A Florida Limited I	ny as it now appear Liability Company)	s on our records.)				
The Articles of Organization for this Limited 1	were filed on	04/23/009		and as	ssigned		
Florida document numberL090000	3968						
This amendment is submitted to amend the fol	llowing:						
A. If amending name, enter the new name	of the limited liab	ility company her	<u>e</u> :				
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	ny," the designation	n "LLC'	or the	abbreviatio	
Enter new principal offices address, if appli	cable:			4 			
(Principal office address MUST BE A STRE	ET ADDRESS)	20381 NE 30TH AVE #202			72		
		MIAMI FL 331	180		NOT	"HAT"	
				SS NAR	25	STEPPHENE STEPPHENE	
Enter new mailing address, if applicable:				E C	<b>&gt;</b>	711	
(Mailing address MAY BE A POST OFFICE	20381 NE 307	TH AVE #202	S	<u> </u>			
		MIAMI FL 331	180	ORIO,	20		
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:		<u>e</u> :	ur records, <u>ente</u>	er the I	name	of the nev	
	10220 NIM I	TEDDACE					
New Registered Office Address:	10330 1997 3	0 NW 5 TERRACE  Enter Florida street address					
		MIAMI , Florida		33172			
	City		, = ==== <del>===</del>	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title **Address Type of Action** Name ☐ Add Remove ☐ Add Remove ☐ Add ☐ Remove ∏Add Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_\_\_\_\_JUNE 14 2012 Signature of a member or authorized representative of a member **GUSTAVO AYUS** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00