

LD000027949

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(Address)

(Address)

(City/State/Zip/Phone #)

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EXAMINER



100182314061

06/28/10--01022--002 **25.00

FILED

10 JUN 28 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZADD 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:

Michael Gypps/JOHN Crumpton
Name of Person

ZADD LLC
Firm/Company

1342 GEORGETOWNE CIRCLE
Address

SARASOTA, FLORIDA 34232
City/State and Zip Code

Michaelgypps@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Gypps at (941) 315 0932
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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)

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**

ZADD LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12th March 10 and assigned
Florida document number L10000027949

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1342 GEORGETOWN CIRCLE
SARASOTA, FLORIDA 34232

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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	Name	Address	Type of Action
MGR	Michael Gypps	4130 OLD US HWY 41 SPRING CITY FLORIDA 33586	☐ Add ☒ Remove
S	NICHAEZ GYPPS	4130 OLD US HWY 41 SPRING CITY FLORIDA 33586	☐ Add ☒ Remove
MGR	DEBRA GYPPS	1342 GEORGETOWN CIRCLE SARASOTA FLORIDA 34232	☒ Add ☐ Remove
S	DEBRA GYPPS	1342 GEORGETOWN CIRCLE SARASOTA FLORIDA 34232	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 20th 2010

Signature of a member or authorized representative of a member

NICHAEZ GYPPS

Typed or printed name of signee