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TO:	Registration S Division of Co		· • • • • • • • • • • • • • • • • • • •	**				
SUBJE	CT:	Z	IW, LLC					
		Name of Limited Liability Company						
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please r	eturn all corresp	ondence concerning this matter	to the following:					
			Burton Ritchie					
			Name of Person					
			ZIW, LLC					
			Firm/Company					
			6215 N 9th Ave					
			Address					
			Pensacola, FL 32504					
			City/State and Zip Code	, , , ·				
	14. °	E-mail address: (eenterprises@gmail.com. to be used for future annual report no	tification)				
For furt	her information	concerning this matter, please of						
	С	rystal Henry	at (850)	777-0868				
		of Person	Area Code & Dayti	ime Telephone Number				
Enclose	d is a check for t	the following amount:						
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
		LING ADDRESS:	STREET/COUI Registration Sec	RIER ADDRESS:				
Division of Corporations		Division of Corp						

P.O. Box 6327

Tallahassee, FL 32314

Tallahassee, FL 32301

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ZIW, LLC		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appea da Limited Liability Company)	rs on our records.)	
`			
The Articles of Organization for this Limited Liability	y Company were filed on	03/15/2010	and assigned
Florida document number L10000028679	·		
•			
This amendment is submitted to amend the following	•		
A. If amending name, enter the new name of the I	imited liability company he	re:	
, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	_	
The new name must be distinguishable and end with the	words "Limited Liability Comp	any," the designation "I	LC" or the abbreviation
"L.L.C."			
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	• • •		
B. If amending the registered agent and/or re-		our records, <u>enter t</u>	
registered agent and/or the new registered office a	ddress here:		2 S
			到 7 1
Name of New Registered Agent:		,	
New Registered Office Address:			T9 3 M
	Ei	nter Florida street ada	高記 : O -
		. Florida	REA 5
	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 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>	<u>Name</u>	Address	Type of Action
MGR_	Jason Yeatman	5402 Golden Pond Ave Northpoint, AL 35473	Add Remove
MGR	William J Overman	2150 Keats Dr. Pensacola, FL 32503	✓ Add ☐ Remove
MGR	Crystal Henry	3355 Seabreeze Dr. Pensacola, FL 32503	Add Remove
MGR_	Benjamin Galecki	433 Shiloh Dr. Pensacola, FL 32503	Add Remove
MGR_	Robert Biggerstaff	_ 303.Teakwood Cir. Pensacola, FL 32506	Add Remove
MGR	Edward Crews	7037 Northpointe Dr. Pensacola, FL 32514	Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
<u> </u>			-
Dated	September 4,	2012	
	50C		
	Signature of a m	nember or authorized representative of a member	
		Burton Ritchie Typed or printed name of signee	
		7: P	

Page 2 of 2

Filing Fee: \$25.00