

FROM :

Division of Corporations

FAX NO. 3354243629

FEB 2 2011 4:17PM P1

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

**L. SELLERS**

FEB -3 2011

From:

Account Name : RASCO, REININGER, PEREZ & ASSOCIATES, P.A.  
Account Number : 104076000124  
Phone : (305)476-7100  
Fax Number : (305)476-7102

**EXAMINER**

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: lperez@rascooklock.com

RECEIVED  
11 FEB -2 PM 4:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ZIMA INVESTMENTS LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

FILED  
11 FEB -2 AM 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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FROM :

FAX NO. : 3054449829

Feb. 2 2011 4:28PM P2

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ZIMA INVESTMENTS, 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:

**LUIS A. PEREZ, ESQ.**

Name of Person

**MIAMI CORPORATE SYSTEMS, LLC**

Firm/Company

**283 CATALONIA AVE., 2ND. FLOOR**

Address

**CORAL GABLES, FLORIDA 33134**

City/State and Zip Code

**lperez@rascoklock.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Luis A. Perez, Esq.**

Name of Person

at ( 305 )

**476-7100**

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

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11 FEB -2 AM 10:36  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

FROM :

FAX NO. : 3054449829

Feb. 2 2011 4:28PM P3

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**ZIMA INVESTMENTS, 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 January 24, 2011 and assigned  
Florida document number L11000009875

This amendment is submitted to amend the following:

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

n/a

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)

**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: n/a

New Registered Office Address:

Enter Florida street address

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

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FROM :

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LUIS ALONSO	9240 S.W. 72 Street, Suite 108 Miami, Florida 33173	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	HILDA ALONSO	9240 S.W. 72 Street, Suite 108 Miami, Florida 33173	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

February 2,

2011

Signature of a member or authorized representative of a member

LUIS A. PEREZ, ESQ.

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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