L11000117418

| (Requestor's Name) | |
|---|---|
| (Address) | - |
| (Address) | - |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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COVER LETTER

| | egistration Se ivision of Cor | | r | |
|------------------|---|--|--|---|
| SUBJECT | | ZDRAVKO, LLC | | |
| SUBJECT | • | Name of Lir | mited Liability Company | |
| The enclose | ed Articles of | Amendment and fee(s) are su | bmitted for filing. | |
| | | ndence concerning this matter | - | |
| | | Tyrone Zdravko | | |
| | | - | Name of Person | <u></u> |
| | | REESER & ZDRAVKO, | LLC | |
| | | | Firm/Company | |
| | | 3411 PALM HARBOR B | LVD SUITE A | |
| | | | Address | |
| | | PALM HARBOR, FL 346 | 83 | 200 |
| | | | City/State and Zip Code | 2004 SEP 25 Int 9:32 SECRETARY SEE TH |
| | | tzdravko@ozlawoffice.com | | 25 |
| Γ £ l : | to group at | | to be used for future annual report notification) | |
| | | oncerning this matter, please c | all: | The co |
| TYRONE Z | | · | 727 787-5919 at () | |
| | Name of | Person | Area Code Daytime Telephone | Number |
| Enclosed is | a check for th | e following amount: | | |
| □ \$25.00 l | Filing Fee | ■ \$30.00 Filing Fee & Certificate of Status | Certified Copy Co (additional copy is enclosed) Co | 0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed) |
| Re Div P.C | iling Address gistration S vision of Co D. Box 6327 Hahassee, F | ection orporations | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, S Tallahassee, FL 32303 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| REESER & ZDRAVKO, LLC | | | | |
|--|---|---|----------------------------------|--|
| (Name of the Limit | ted Liability Compa (A Florida Limited | iny as it now appears on our reco Liability Company) | ords.) | |
| The Articles of Organization for this Limited L | iability Company | were filed on 10-13-2011 | and assigned | |
| his amendment is submitted to amend the follo | owing: | | | |
| If amending name, enter the new name o | f the limited liab | ility company here: | | |
| SSIAN & ZDRAVKO, LLC | | | | |
| he new name must be distinguishable and contain the w | ords "Limited Liabi | lity Company," the designation "LI | LC" or the abbreviation "L.L.C." | |
| Enter new principal offices address, if applicable: | | 3411 PALM HARBOR BLV | 'D SUITE A | |
| Principal office address MUST BE A STREET ADDRESS) | | PALM HARBOR, FL 34683 | | |
| | | | 517.021 | |
| nter new mailing address, if applicable: | | 3411 PALM HARBOR BLV | O SUITE A SEE 25 | |
| Mailing address MAY BE A POST OFFICE BOX) | | PALM HARBOR, FL 34683 | | |
| | | | | |
| | | | 22 | |
| If amending the registered agent and/or r gent and/or the new registered office addres | | address on our records, <u>ente</u> | er the name of the new regist | |
| Name of New Registered Agent: | TYRONE ZDR | AVKO | | |
| New Registered Office Address: | 3411 PALM HA | ARBOR BLVD SUITE | 4 | |
| Non negation office radiess. | Enter Florida street address | | | |
| | PALM HARBO | DR . F | Horida <u>34683</u> | |
| | | 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Ment. Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|----------------|-------------------------------|----------------|
| MGR | TYRONE ZDRAVKO | 3411 PALM HARBOR BLVD SUITE A | ≡ Add |
| | | PALM HARBOR, FL 34683 | □Remove |
| | | | □Change |
| MGR | MARK A OSSIAN | 2201 NE COACHMAN RD SUITE 201 | \ Add |
| | | CLEARWATER, FL 33765 | □Remove |
| | | | □Change |
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| fective date, if other than the dat | SEPT | EMBER 23, 2024 | | (optional) | | |
| in effective date is listed, the date must be: | pecific and cannot b | e prior to date of file | ng or more than 90 da | ys after filing.) P | ursuant to 605. | 0207 (|
| ote: If the date inserted in this block ocument's effective date on the Department. | ment of State's re | applicable statutor cords. | y ming requiremen | its, this date wi | n not be liste | a as t |
| | | | | | | |
| ecord specifies a delayed effective dat is filed. | e, but not an effec | tive time, at 12:01 | a.m. on the earlier | of: (b) The 9 | Oth day after | the |
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| sted SEPTEMBER 23 | · 2024 | <u>`</u> | | | | |
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Typed or printed name of signee