#_11000122048

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K.**SALY** EXAMINER 2011 NON 8

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NEtzero Ventures// C/D Anthony (tinnon Zelle Ventures, Firm/Company N. PMB. 280 seve It 10460 ersburg t E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 1Hhon1 at (🖊 Area Code & Daytime Telephone Number Name of Person ,r <u>, '</u> . Enclosed is a check for the following amount: , \$25.00 Filing Fee \$55.00 Filing Fee & • 1 \$60.00 Filing Fee, \$30.00 Filing Fee & Certified Copy Certificate of Status & Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) 1 MAILING ADDRESS: STREET/COURIER ADDRESS: **Registration Section Registration Section** Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 **,**f 1. 2.1 s 1 · · · · · بالمتحاجين والمرج ۰.

ARTICLES OF TO ARTICLES OF O O	O DRGANIZATION	FILED			
NET ZERO DEVEL		11 NOV -7 PM 5: 45			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	iability Company)	TALIANSPE, FLAMA			
The Articles of Organization for this Limited Liability Company Florida document number 11000 22048	were filed on <u>[0]26]201</u>	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, <u>enter the new name of the limited liab</u>	<u>ility company here</u> : NRFZ61	Co Development GROUP, 11C			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the designation "L	LC" or the abbreviation			
Enter new principal offices address, if applicable:	14/1 N. Wes.	<u>FShare BI</u> VD. Ste322			
(Principal office address MUST BE A STREET ADDRESS)	JAMPA FL	33607			
Enter new mailing address, if applicable:	10460 NEXT Ge	n Strateales-1/C			
(Mailing address MAY BE A POST OFFICE BOX)	475 K Street Washington DC.20	NLS Len/7 999			
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> 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	Zip Code			
<u>New Registered Agent's Signature, if changing Registered Agent:</u>					

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

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

.

<u>Title</u>	<u>Name</u>	Address	Type of Action			
mR_	Chris Felkam	2 10460 Roosevelt Bl ANB 255 St. Peters burgt	UD NRemove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. 11 amer	nding any other informatio	n, enter change(s) here: (Attach additional she	eets, if necessary.)			
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	[111/0+1]	7				
Dated	inter M. Com Mot by Montures					
	Antlony M. Gnng - NetZerovENTURS LCC Typed or printed name of signee					
Page 2 of 2						
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Filing Fee: \$25.00