L1200124246

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SECRETARY OF STATE
TALLARISSES, FLORIO.

ī :-

JUL 24 2015 S. YOUNG

COVER LETTER

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JULIO E ZULETA	•			
		Name of Person			
	ZULETA ENTERPRISES	, LLC			
		Firm/Company			
	16381 SHENANDOAH CIRCLE				
		Address	· · · · · · · · · · · · · · · · · · ·		
	FORT MYERS, FL 33908	1	= 100 ज		
		City/State and Zip Code			
	zuly15een@yahoo.com				
	E-mail address: (to be used for future annual report notif	fication) School Part Co.		
For further information of	concerning this matter, please c	all:	河宫 湿 (
JULIO E ZULETA		239 281-7556 at ()	fication) 21 Par 12: 18		
Name o	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for t	ha fallawing amount:				
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,		
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
	ING ADDRESS:	STREET/COURI			
Registration Section Division of Corporations		Registration Section Division of Corporation			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

i. Na	ama of the limited liability company: ZULETT	FENTER PR	ises LLC
2. (a)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9.28-12		L12000124246
3.	Date of filing/registration in Florida	4	Document number
5. (a)	Inlin & Zuluta		
J. (u)	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of St	ate;
	14381 Thunandoah Cir		
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	
	TI IAI		-
	++ Myers ,FL	33908	<u> </u>
<i>(</i> 1.)			,
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	一
	16381 Smenandoah Cir		a a sa a a a a a a a a a a a a a a a a
	NEW Registered Office Address:	···-·	
	•		
			三
	It Myers , FL	23908	
	•		
if the li the chai	mited liability company is not organized under the lav nge or changes are made, the Florida street address of	vs of the State of I	Florida, it is hereby confirmed that after
agent w	ill be identical. Or, in the case of a Florida limited lia	ability company, it	t is hereby confirmed that the change(s)
was/we	re authorized by an affirmative vote of the members o cles of organization or the operating agreement of the	of the limited liabil	lity company or as otherwise provided in
~	or organization of the operating agreement of the		
Signati	ure of a member or authorized representative of a member		Printed or typed name of signee
I hereb provision he obli o mere votified	y accept the appointment as registered agent and agrous of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I have the complete in writing of this change.	ree to act in this co performance of m d for in Chapter 6 hereby confirm tha	npacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
Signatur	e of Registered Agent		