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Division of Corporations

Fax Number

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From:

Account Name : LEVIN LAW & MEDIATION GROUP

Account Number : I20140000093 Phone : (941)953-5300 Fax Number : (941)953-5355

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

Email Address: Linda@ Levin Mediation.com

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ZIPCO, LLC

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COVER LETTER

	Registration Se Division of Corp			
SUBJEC	Zipco, LLC			
3012 CC	· I ·	Name of Lin	ited Liability Compuny	
The encl	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter	_	
		Jerome S. Levin		
			Name of Person	
		Levin Law & Mediation G	roup	
			Firm/Сотрыпу	
		1444 First Street, Suite A		
			Address	
		Sarasota, FL 34236		
			City/State and Zip Code	
		linda@levinmediation.com		
Roe liveth	er information c	E-mail address: (oncerning this matter, please o	to be used for future annual report not	ification)
Jereme S		oncerning this minus, produce of	941 953 5300	
устошть г	Name o	f Parson	at ()	ne Telephone Number
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Enclosed	l is a check for th	ne following amount:		
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	Registr Divisio P.O. Bi	INC ADDRESS: nation Section on of Corporations ox 6327 assec, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Zipco, 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 October 18, 2012 _ and assigned 🧐 Florida document number L12000132799 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 11051 Gatewood Drive Enter new principal offices address, if applicable: Lakewood Ranch, FL 34211 (Principal office address MUST BE A STREET ADDRESS) 11051 Gatewood Drive Enter new mailing address, if applicable: Lukewood Ranch, FL 34211 (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: Jerome S. Levin Name of New Registered Agent: 1444 1st Street, Suite A New Registered Office Address: Enter Florida street address

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, I hereby confirm that the limited liability company has been notified in writing of this change.

City

Sarasota

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H180002288463

AMBR = A	authorized Member		···· —· —·
<u>Title</u>	Name	Address	Type of Action
MGR	Devald, Yaron	1221 1st Street	
		Sarasota, FL 34236	■ Remove
			☐ Change
MGR	Hactzni, Nadav	1444 1st Street, Suite A	
		Sarasota, Fl 34236	□ Remove
			≅ Change
MBR	Hatusers Pituch LTD	1444 1st Street, Suite A	
		Sarasota, Fl 34236	☐ Remove
			D Add
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. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.	H18000228846
		
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(If an effective Note: If the	date, if other than the date of filing:	Pursuunt to 605,0207 (3)(t vill not-be listed as the
the record	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. o Ith day after the record is filed.	on the earlier of:
Dated	€-1 2018	
	L of	
	Signature of a member or authorized representative of a member	
	Jerome S Levin, Authorized Representative	
	Typed or printed name of signer	

Page 3 of 3

Filing Fee: \$25.00