# 13000035436

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
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APR 26 2013

#### **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

## ZZ-MAK PROPERTIES LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

### Hossein Makhzan

Name of Person

#### ZZ-MAC PROPERTIES LLC

Firm/Company

116 Springhurst Circle

Address

Lake Mary, FL 32746

City/State and Zip Code

## hmakhzan@gmail.com

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

For further information concerning this matter, please call:

## Hossein Makhzan

Name of Person

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

#### **MAILING ADDRESS:**

**Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

#### Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BQTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

Name of the limited liability company: ZZ-MAC PROPER	RTIES LLC	New
1. Name of the infined habitity company.	1120 220	
2. (a) Principal office address of limited liability compa		
(Note: MUST BE STREET ADDRESS)	Lake Mary, FL 32746	·
	· · · · · · · · · · · · · · · · · · ·	
(b) Mailing address of limited liability company:	116 Springhurst Circle	
(Note: MAY BE POST OFFICE BOX)	Lake Mary, FL 32746	720
	-	
		至高气
3/8/2013	L13000035436	7 7 7
3. Date of filing/registration in Florida	4. Document number	- SP型 OT i
	,	
5. (a) Registered Agent and Registered Office shown or	n the records of the Florid	a Dept. of State:
Pagistared Agants	Zahra Makhzan	# · 2
Registered Agent:	Zalifa Makitzali	<del></del>
Registered Office Address:	116 Springhurst Circle	
	Lake Mary, FL 32746	
NEW Registered Agent:	Zahra Soleymantabar Makhza	n New
NEW Registered Office Address:	935 Shriver Circle	<u>/</u>
(MUST BE FLORIDA STREET ADDRESS)	Lake Mary, FL 32746	,FL
		,FL
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change (the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a member or authorized representance of a member	Florida street address of to the ntical. Or, in the case of a second was/were authorized by wise provided in the article.	he registered office a Florida limited
HOSSEIN MAKHZAN, Zahra Printed or typed name of signee	Soleymanta bar	Makhzan
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with a compand I hereby confirm that the limited liability compand	l agree to act in this capac proper and complete perfo	city. I further agree to ormance of my duties.
Chapter 608, F.S. Or, if this document is being filed to naddress. I hereby confirm that the limited liability compa	position as registered age nerely reflect a change in iny has been notified in wi	nt as provided for in the registered office riting of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00