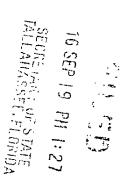
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SEP 20 20Th J. HARRIS

COVER LETTER

TO:	Registration S Division of Co	ection rporations	•	
CUDIE		ompany LLC		
SUBJE	.c.:	Name of Lim	ited Liability Company	
The end	closed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
		Gregory R Francuz		
			Name of Person	
		Zafar & Company LLC		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		5730 SW 74th Street Suite	300	
			Address	
		South Miami Florida 3314	3	
			City/State and Zip Code	
		gregfrancuzcpa@gmail.com		
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information	concerning this matter, please ca	all:	
Greg F	rancuz		305 281-3954 at ()	
•	Name	of Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for	the following amount:		
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Zafar & Company LLC				_
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our rec lited Liability Company)	cords.)		
he Articles of Organization for this Limited Liability Comp	pany were filed on 04/25/2013		and	assigned
lorida document number L13000060897				
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited	liability company here:			
Zafar Francuz & Company LLC				
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "	LLC" or the abb	reviation	"L.L.C."
Enter new principal offices address, if applicable:	<u> </u>			
Principal office address MUST BE A STREET ADDRES.	<u>s)</u>			
		TEC C	က	, ,
		<u> </u>	 [1]	Ľ,
		25	9	. wear
nter new mailing address, if applicable:		<u> </u>	-0	; P i
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · ·	;, T		
		유코		***************************************
		. <u>E</u> M	-	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere egistered agent and/or the new registered office address		CREINS OF STAFE	SEP 19 PII 1:27	
Name of New Registered Agent:				
New Registered Office Address:				
110W Registered Office Address.	Enter Florida street ad	dress		
		Florida		
	City		Zip Co	ode

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.

If Changing Registered Agent, 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
			Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
		SECRLIA FALLAHA	CD Change
		AHAS FELFLORIDA	Add Remove
		AON STE	Remove
			Add
			□ Remove
			Change

			
			
			
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does not meet the applic	cable statutory filing		
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1	specific and cannot be prior does not meet the application of State's records from the first of State, but not is filed.	specific and cannot be prior to date of filing or more does not meet the applicable statutory filing rtment of State's records. ffective date, but not an effective tild is filed.	specific and cannot be prior to date of filing or more than 90 days after filing does not meet the applicable statutory filing requirements, this day rement of State's records. If the state is records an effective time, at 12:01 a.m. is filed.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00