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, (F	Requestor's Name)			
(Address)				
(Address)				
((City/State/Zip/Phone #)			
PICK-UP	☐ WAIT ☐ MAIL			
(Business Entity Name)				
(Susmess Emily Name,			
(Document Number)				
(i	Document Number)			
Certified Copies	Certificates of Status			
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SECNETARY OF STATE

NELSQN SLOSBERGAS, P.A.

SUITE 310
MIAMI, FLORIDA 33131
E-MAIL ADDRESS nelson@miami-intl-law.com
WEB PAGE www.miami-intl-law.com

NELSON SLOSBERGAS ATTORNEY AND CIVIL LAW NOTARY (305) 374-0030 FAX (305) 374-2855

December 1, 2015

Secretary of State
Registration Section/Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: ALOMANI LLC - TZC INVESTMENTS LLC - ZDZ REAL ESTATE LLC

Dear Sir or Madam:

Please find attached the Articles of Amendment to Articles of Organization for ALOMANI LLC, the Statement of Change of Registered Office or Registered Agent or both for Limited Liability Company for TZC INVESTMENTS LLC and ZDZ REAL ESTATE LLC, and check for the filing fees in the amount of \$75.00.

Kindly return the letters of acknowledgment in the attached *federal express envelope*, once the amendments have been filed.

Thank you for your attention to this matter.

Very truly yours,

Rita Salgado

Corporate Legal Secretary

Lie Selgado

[Direct E-Mail: rita@miami-intl-law.com]

Enclosures (as noted)

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.

1. N	ame of the limited liability company:TZC INVES	TMENTS LLC	
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	621 DESTACADA AVENUE		621 DESTACADA AVENUE
	CORAL GABLES, FL 33156		CORAL GABLES, FL 33156
	JANUARY 30, 2014		L14000016817
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of		<u>.</u>
	Registered Agent and Registered Office shown on the records of	f the Florida Dept.	of State:
	SKOLA, THOMAS J. ESQ.		
	Registered Office Address (MUST BE FLORIDA STREET	<u> (ADDRESS)</u>	
	621 DESTACADA AVENUE		
	CORAL GABLES , F	L <u>33156</u>	DEC -3
(h)			SEE & F
. ^(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	FLO	
	NS CORPORATE SERVICES INC.		
	NEW Registered Office Address:	<u> </u>	
	1110 BRICKELL AVENUE - SUITE 310		
	, FI	I. 33131	
the cha agent was/wa	Limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited le ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	nws of the State of the registered iability compan of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
		(CATARINA ROMI ZANAGA
Signature of a member or anthorized representative of a member			Printed or typed name of signee
provisi the obi to mer notifie	by accept the appointment as registered agent and ag ions of all statules relative to the proper and complete ligations of my position as registered agent as provide ely reflect acciding in the registered office address, I d in writing of with the age	ree to act in thi e performance o ed for in Chapte hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being filed a that the limited liability company has been
Signatu	re of Registered Agent		