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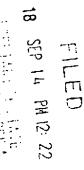
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TO STANDANONS

COVER LETTER

TO:	Registration Se Division of Cor			
SIIDIC	ZEN LUXU	JRY LIVING, LLC		
SUBJE			nited Liability Company	······
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	endence concerning this matter	to the following:	
		AMY BARNARD		
		UNICORP NATIONAL D	Name of Person DEVELOPMENTS, INC.	
			Firm/Company	
		7940 VIA DELLAGIO W	AY, SUITE 200	
		ORLANDO, FL 32819	Address	
		AMY@UNICORP.COM	City/State and Ztp Code	
			to be used for future annual report notif	ication)
		oncerning this matter, please ca	all:	
AMY B	ARNARD		407 999-9985 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
■ \$ 25	.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

ZEN LUXURY LIVING, LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
he Articles of Organization for this Limited Liability Company	y were filed on FEBRUARY 3, 2017 and assigned
Torida document number L14000022638	
the Articles of Organization for this Limited Liability Company were filed on FEBRUARY 3, 2017 and assigned document number L14000022638 his amendment is submitted to amend the following: 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" onter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
4. If amending name, enter the new name of the limited liab	bility company here:
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	10000000000000000000000000000000000000
Inter new mailing address, if applicable:	
	<u> </u>
3. If amending the registered agent and/or registered of	office address on our records, enter the name of the
and the second s	Σ.
Name of New Registered Agent:	
New Registered Office Address:	
ness registered Office Address.	Enter Florida street address
	Florida
-	City Zip Code

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
MGR	UNICORP INVESTORS IV. LLC	7940 VIA DELLAGIO WAY	
		SUITE 200	
		-	Remove
		ORLANDO, FL 32819	
			Change
MGR	UNICORP INVESTORS III, LLC	7940 VIA DELLAGIO WAY	
			Add
		SUITE 200	
			☐ Remove
		ORLANDO, FL 32819	`
		-	Change
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ective date, if other than the date of effective date is listed, the date must be spe	of filing:	rior to day of filiper	or more than 90 days	optional)	s (170)
te: If the date inserted in this block do	es not meet the app	licable statutory	filing requirements	this date will not be list	5.020 led as
cument's effective date on the Departm	ent of State's recor	rds.			
record specifies a delayed effer The 90th day after the record is	ctive date, but filed.	not an effectiv	ve time, at 12:0	01 a.m. on the earli	er o
SEPTEMBER 12	2018	7			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00