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(Re	equestor's Name)	······································
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations	٠.
SUBJECT: Zachary Gier Enterprises LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return-all correspondence concerning this matter to the following:	
Zachary Gier Name of Person	
Zachary Gier Enterprises LLC Firm/Company	
1146 Donald Ave Address	
Altamonte Springs FL 32714 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Zachary Gier at (321) 626-7829 Name of Person Area Code Daytime Telephone Number	-
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Scertificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Scertified Copy (additional copy is enclosed) \$25.00 Filing Fee Scertified Copy (additional copy is enclosed)	tatus &

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

Zachary (aier Ent	erprises LL	. C	
(Name of the Limit	ed Liability Compan (A Florida Limited Li	y as it now appears of ability Company)	our records.)	
The Articles of Organization for this Limited Life Florida document number LIHO DOO LOO LOO LOO LOO LOO LOO LOO LOO LO	1546. owing:			and assigned
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the desig	nation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applic	able:	1146 D	onald Ave	
(Principal office address MUST BE A STREE		Altamonte	springs FL	32714
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	or registered off	ice address on o	Springs FL ur records, enter the	
New Registered Office Address:	1146	Donald Av	d.	
	Altamonte	Enter Florida	street address, Florida	32714 Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete p stered agent as p registered office o change.	performance of my rovided for in Cha address, I hereby o	oduties, and I am far pter 605 F.S. Or, in confirm that the limit 29 Signature of New Res	miliar with and this document is ted liability
			꼰는 ㅇ	

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 **Type of Action Title** Name **Address** □ Add □ Remove ☐ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove 김등 LICAN ASSE FLORIDA © Change

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ffoot	tive date if other than the date of filing:
an ef lote:	tive date, if other than the date of filing:(optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the nent's effective date on the Department of State's records.
an ef lote: ocun	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste
an ef lote: ocun e re The	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed that is effective date on the Department of State's records. cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier and the record is filed.
fan ef Note: locun e re The	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records. cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier and the record is filed.
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fan ef <u>Note:</u> docun ne re The	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records. cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliese 90th day after the record is filed. 10 - 26 - 2015 Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00