# LISCOCO 57648

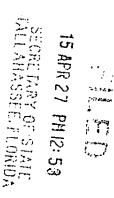
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### Lambertus & Lambertus, P.A.

ATTORNEYS AT LAW

ARTHUR W. LAMBERTUS\*
CHRISTINE L. LAMBERTUS\*

\*FLORIDA BAR BOARD CERTIFIED
WILLS, TRUSTS AND ESTATES LAWYER

April 24, 2015

2929 EAST COMMERCIAL BOULEVARD
SUITE 604
FORT LAUDERDALE, FLORIDA 33308
TELEPHONE (954) 772-1680
FACSIMILE (954) 772-1922

#### **VIA FEDERAL EXPRESS**

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

Re: Zui

Zuni Bell, LLC

L15000053648

To Whom It May Concern:

Enclosed please find the Division of Corporations Cover Letter and Articles of Amendment to Article of Organization for the above referenced limited liability company along with my corporation check in the amount of \$30.00. Please forward the Certificate of Status to my office, I have enclosed a self addresses stamped envelope.

Should you have any questions, please feel free to contact me.

Very truly yours,

Arthur W. Lambertus

AWL/dml Enclosures

## **COVER LETTER**

	tion Section of Corporations
Zur	ni Bell, LLC
SUBJECT.	Name of Limited Liability Company
	cles of Amendment and fee(s) are submitted for filing.  orrespondence concerning this matter to the following:
	Trudy G. Bell
	Name of Person
	Zuni Bell, LLC
	Firm/Company
	2012 NE 30 Ct.
	Address
	Ft. Lauderdale, FL 33306
	City/State and Zip Code trudyalton65@att.net
	E-mail address: (to be used for future annual report notification)
For further inform	nation concerning this matter, please call:
Trudy G. Bell	954 565-6088
1	Name of Person Area Code Daytime Telephone Number
Enclosed is a chec	ck for the following amount:
□ \$25.00 Filing	Fee \$\Bigsquare\bigsquare \text{\$30.00 Filing Fee & Certificate of Status}\$  \bigsquare \text{\$55.00 Filing Fee & Certificate of Status}\$  \bigsquare \text{\$Certified Copy (additional copy is enclosed)}\$  \bigsquare \text{\$60.00 Filing Fee, Certificate of Status}\$  \bigsquare \text{\$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

Zuni	Bell, LLC
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number L15000053648	pany were filed on March 26, 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited</u>	liability company here:
The new name must be distinguishable and end with the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS	5)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered egistered agent and/or the new registered office address	d office address on our records, <u>enter the name of th</u> here:
Name of New Registered Agent:	- 一
New Registered Office Address:	4 A A A A A A A A A A A A A A A A A A A
	Enter Florida street address Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member Title <u>Name</u> <u>Address</u> Type of Action AMBR S. A. Bell 2012 NE 30 Ct. ■ Add Ft. Lauderdale, FL 33306 □ Remove AMBR Evan A. Bell 1120 Seminary St. ■ Add Key West, FL 33041 ☐ Remove □ Remove □ Add ☐ Remove ☐ Add □ Remove

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	- William
ctive date, if other than the ffective date must be specific, can ate this document is filed by the	te date of filing: (optional) nnot be prior to date of receipt or filed date and cannot be more than 90 days after Florida Department of State)
1 April 22	<u> </u>
Drug b	Beee
U	Signature of a member or authorized representative of a member
Trudy G. Bell	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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