Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FORSYTH & BRUGGER, P.A.

Account Number : I20040000147

Phone

: (239)263-6000

Fax Number

: (239) 263-6757

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: TRrugger @ Forsyth Brugger. com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 5770 ZIP DRIVE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	Registration Section
	Division of Corporation:

Zip Drive

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:

Callhan Garrett

Name of Person

Forsyth & Brugger

Firm/Company

AVC. S. # 207

Brugger @ Forsyth Brugger. Com
E-hadinetidress: (to be used for future annual report notification)

For further information concerning this matter, please call:

Callhan

at (239) 263 - 6000 Area Code Daytime Telephone Nu

Enclosed is a check for the 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)

Already paid on firs+ attempt of filing

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5770 Zip Drive, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were filed 3/30/	15 on
Plorida document number <u>L150005</u>	<u>6</u> 478 .	on on on on one of the subtreviation "L.L.C."
This amendment is submitted to amend the following:		10 1
A. If amending name, enter the new name of the limit	ted liability company here:	1967 A O
3601 Hanson St, L	.LC	100 is
The new name must be distinguishable and contain the words "Limite	d 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 ADDRI	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, ente	r the name of the new registered
Name of New Registered Agent:		
New 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.

or removed from our records:		<u> </u>				
MGR = Manager AMBR = Authorized Member			FILED			
<u>Title</u>	<u>Name</u>	Address	2015 MAY 18 PM 1: 57 TALLAHARSEE, FLORIN.			
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Filing Fee: \$25.00