## 000094413

Office Use Only



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JUN 16 2015 Y SULKER

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	ZSP Propert	ies, LLC		
SUDJE		Name of Lim	ited Liability Company	-
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspoi	ndence concerning this matter	to the following:	
		Sarah Watts		
			Name of Person	
		And the second of the second o	Firm/Company	
		2326 Crane Ln		
			Address	-
		Crestview, FL 32536		
			City/State and Zip Code	
		zspprop@cox.net		
		E-mail address: (	to be used for future annual report notifi	ication)
For fur	ther information co	oncerning this matter, please co	all:	
Sarah V	Watts		850 598-3576	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
\$25	5.00 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

ZSP Properties, LLC			
( <u>Name of the Limited</u> (A	Liability Comp Florida Limited	any as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liab Florida document number 800273450598	and assigned		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited lial	bility company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liab	ility Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	n/a	
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:		n/a	ं ज
(Mailing address MAY BE A POST OFFICE BO	OX)		
			23 <b>8</b> 23
B. If amending the registered agent and/or registered agent and/or the new registered office			ords, <u>enter the name of the new</u>
Name of New Registered Agent:	Sarah Watts		
New Registered Office Address:		**	······································
		Enter Florida street ad	dress
			FloridaZip Code
		City	ир Соае

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	<b>Type of Action</b>
MGR	Zeb Watts	2326 Crane Ln	Add
		Crestview, FL 32536	<b>■</b> Remove
			Change
AMBR	Sarah Watts	2326 Crane Ln	□ Add
		Crestview, FL 32536	■ Remove
		<del> </del>	☐ Change
MGR	Sarah Watts	2326 Crane Ln	<b>=</b> Add
		Crestview, FL 32536	□ Remove
			Change
			AGO AGO
			Remove C
			□ Remove \
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			□ Remove
			Change
<del></del>	-	-	Add
			Remove
			☐ Change

Effective date, if other than the date of filing:  (If an effective 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 605.020.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the poth day after the record is filed.  Dated  June 11  2015  Add Watts  Signature of a member or authorized representative of a member			
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Dated June 11 , 2015			me, at 12:01 a.m. on the earlier of:
Signature of a member or authorized representative of a member	June 11	2015	
Signature of a member or authorized representative of a member	Carola		
	mund	Signature of a member or authorized representative of	f a member
Sarah Watts		Typed or printed name of signee	

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Filing Fee: \$25.00