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COVER LETTER

Division of Co	rporations		
SUBJECT:		IDADORA ZZ LLC	
SUBJECT:		nited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MARIA	A MERCEDES VELASQUEZ	
		Name of Person	
	VELASÇ	QUEZ TAX SERVICES CORP	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	175	0 NW 107 AVE STE NM1	
		Address	
		MIAMI FL 33172	
		City/State and Zip Code	
	E-mail address: ((to be used for future annual report notif	ication)
For further information e	oncerning this matter, please c	all:	
		at ()	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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:

TO:

Registration Section

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

	FI	E	r~.
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<u>ds.</u>) //1	SSEE.	FLORI	

ARRENDADORA ZZ LLC

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

(A Flotida Limit	ed Liability Company)	LORIDA		
The Articles of Organization for this Limited Liability Compa	any were filed on $\frac{08/23/26}{}$			
Florida document number L16000158317				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	iability company here:			
N/A				
The new name must be distinguishable and contain the words "Limited L	ability Company," the designat	ion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1750 NW 107 AVE S	1750 NW 107 AVE STE NM1		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI FL 33172	MIAMI FL 33172		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1750 NW 107 AVE STE NM1 MIAMI FL 33172			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address by Name of New Registered Agent: JUAN ZAM	nere;	records, enter the name of the		
1750 MM 17	07 AVE STE NM1			
New Registered Office Address: 1750 NW 10	Enter Florida stro	eet address		
MIAMI		, Florida ³³¹⁷²		

New Registered Agent's Signature, it 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	GIANFRANCO ZAMPETTI	1750 NW 107 AVE STE NM1	■ Add
		MIAMI FL 33172	☐ Remove
			Change
			☐ Remove
			TALLAHASS
			Remove Fishers
			☐ Change
			Add
			☐ Remove
			☐ Change
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			□ Remove
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ective date, if other than t	so data of fi	10/27/2010	;		_ (optional	`
effective date is listed, the date n	ust be specific	and cannot be prio	r to date of filing	or more than 90 c	lays after filin	g.) Pursuant to 605.0
te: If the date inserted in this ument's effective date on the				ming requireme	ents, this dat	e will not be listed
record specifies a delay			ot an effecti	ve time, at 1	2:01 a.m.	on the earlier
he 90th day after the re	cora is file	ea.				
ed		2016				
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		f a member or auth) - W//			

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Filing Fee: \$25.00