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SECKETARY OF STATE ALLAHASSEE, FLORIDA

## **COVER LETTER**

Division of Co	rporations		
SUBJECT:	ZDegree LL	.C	
300,000		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
		Eric Wang	
		Name of Person	
		ZDegree LLC	
		Firm/Company	
		3033 SW 34th St.	
		Address	<del></del>
	Ga	ainesville, FL 32608	
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please co	all:	
		at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

ZDegro	ee LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appear. Liability Company)	on our records.)	<del>-</del>
The Articles of Organization for this Limited Liability Company	wwere filed on	01/12/2017	and assigned
Florida document number <u>L17000009840</u> .			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited lial</u>	oility company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liab	ility Company." the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		<del></del>	SE T
			AE S TI
Enter new mailing address, if applicable:	3033 SW 34th	St.	ILE 28
Mailing address MAY BE A POST OFFICE BOX)	Gainesville, FL	32608	FLS1 32 CD
			ORIGA -
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		our records, <u>ente</u>	the name of the
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	da street address	
	City	, Florida _	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Eric Wang	3033 SW 34th St.	■ Add
		Gainesville, FL 32608	Remove
		<del> </del>	☐ Change
			Add
			□ Remove
		Change	
			Add
			☐ Remove
	<del></del>	□ Change	
		□ Remove	
			Change
		□ Add	
		□ Remove	
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			☐ Remove
			□ Change

	<b>-</b> .
	SEC:
	## <b>F</b>
	<u> </u>
	ATE ORID
	⇒
E. 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 dat  Note: If the date inserted in this block does not meet the applicable s document's effective date on the Department of State's records.	(optional) e of filing or more than 90 days after filing.) Pursuant to 605,0207 (3 tatutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an (b) The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier of:
Dated August 24 . 2047.	
Signature of a member of authorized	representative of a member
Fun 7 /2	
Typed or printed man	e of signee

Page 3 of 3

Filing Fee: \$25.00