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COVER LETTER

TO:	Registration So Division of Cor				
SUBJI	ECT:	ZARATE	INVESTMENT, LLC		
			ited Liability Company)		
The en	iclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
JIM ZARATE					
(Name of Person)					
ZARATE INVESTMENT, LLC.					
(Firm/Company)					
		-	(Address)		
			KATY TX 77494		
(City/State and Zip Code)					
For fur	ther information of	concerning this matter, please c	all:		
JIM ZARATE			at (_786) 630-5483		
	(Name of Person) (Area Code & Daytime Telephone Number)			elephone Number)	
Enclos	ed is a check for t	he 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

ZARATE INVESTMENT, 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 Company were filed on _______ and assigned Florida document number L17000076922

Florida document number L17000076922 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the authentiation 25118 DIAMOND RANCH DRIVE Enter new principal offices address, if applicable: **KATY TX 77494** (Principal office address MUST BE A STREET ADDRESS) 1122 N FLAGLER AVENUE #B Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) **HOMESTEAD FLORIDA 330300** B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address)

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 608, 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR /PI	F JIM ZARATE	1122 N FLAGLER AVENUE SUITEB HOMESTEAD, FLORIDA 33030	Add Remove	
MEMBEI	F LINA ZARATE	1122 N FLAGLER AVENUE SUITEB HOMESTEAD, FLORIDA 33030	Add Remove	
			T JUNION Add PH	
			Add Respove	
			Add Remove	
			Add Remove	
D. If an	nending any other information	, enter change(s) here: (Attach additional sheets, if necessary.)		
	WE OFFER A WIDE RANGE	OF PRODUCTS AND SERVICES. OUR WORLDWIDE OF		
	DISTRIBUTION CENTRE SHI	P ONLY THE HIGHEST QUALITY. BUYING AND SELLING	_	
	PETROLEUM-DERIVED HYDROCARBONS AND RELATED.			
			_	
			 -	
Dated JU	JNE 13	. 2017		
		- jm27316		
	Signatu	re of a member or authorized representative of a member		
		JIM ZARATE Typed or printed name of signee		

Page 2 of 2

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