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J. HARRIS

## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:	Z & S Tire	s, LLC		
SOBJECT.		Name of Lin	nited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
			-	
Please return	i all correspo	indence concerning this matter	to the following:	
		Charlie Zaghlul		
			Name of Person	
			Firm/Company	
		9020 Vista Way		
			Address	
		Parkland, FL 33076		
		·	City/State and Zip Code	<del></del>
		zaghlulch@gmail.com		
		E-mail address: (	to be used for future annual report notif	fication)
For further is	nformation co	oncerning this matter, please co	all:	
Charlie Zagl	hlul		954 389-8077 at ( )	
	Name of	f Person	Area Code Daytime	e Telephone Number
Enclosed is a	check for th	e following amount:		
<b>∃ \$</b> 25,00 F	iling 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

TO:

Registration Section

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

Z & S THES, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our record mited Liability Company)	18.)
The Articles of Organization for this Limited Liability Conference of Organization for this Limited Liability Conference of Conf	npany were filed on 07/24/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	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 ADDRES	<u> </u>	
		25.
		A
Enter new mailing address, if applicable:		CU Comment
Mailing address MAY BE A POST OFFICE BOX)		177 - 177 -
B. If amending the registered agent and/or register registered agent and/or the new registered office address	ed office address on our records s here:	s, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addres.	s
<del></del>		orida
	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.

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	Z & S MANAGEMENT, LLC	9020 Vista Way, Parkland,	
		FL 33076	■ Remove
			☐ Change
MGR	Management ZS, LLC	9020 Vista Way, Parkland.	■ Add
	FL 33076		
			Change
			D Add
			Remove
			□ Change
<del></del>			
			□ Remove
			Change
<del></del>			Add Remove
			All Remove SSE Change 2: Add Add Add Add Add Add Add Add Add Ad
			Change

<u> </u>		
		<del></del>
ffective date, if other than the date of fan effective date is listed, the date must be specific tote: If the date inserted in this block does rocument's effective date on the Department	c and cannot be prior to date of filing or more than 90 day not meet the applicable statutory filing requiremen	(optional) rs after filing.) Pursuant to 605.02 ts, this date will not be listed a
e record specifies a delayed effectiv The 90th day after the record is file	ve date, but not an effective time, at 12 ed.	:01 a.m. on the earlier (
August 7th	2017	
		2017 A Salue TALLA
Signature o	of a member or authorized representative of a member	× 3 6
Signature of Charlie Zaghlul	of a member or authorized representative of a member	SSE =
	of a member or authorized representative of a member	SS =

Filing Fee: \$25.00