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## **COVER LETTER**

Division o	f Corporations	
ZAP (	COMMUNITY INVESTMENTS, LLC.	
SUBJECT.	Name of Limited Liability Company	
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.	
Please return all cor	respondence concerning this matter to the following:	
	MICHELE ARANGO	
	Name of Person ZAP COMMUNITY INVESTMENTS, LLC.	
	Firm/Company 7444 POND CIRCLE	
	Address SPRING HILL, FL 34606	
	City/State and Zip Code MICHELE.ARANGO@GMAIL.COM	
	E-mail address: (to be used for future annual report notification)	
For further informat	ion concerning this matter, please call:	
MICHELE ARANG	GO 941 301-5566	
N:	art (	
Enclosed is a check	for the following amount:	
□ \$25.00 Filing Fe	ee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

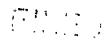
**Registration Section** 

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



ZAP COMMUNITY INVESTMENTS, LLC.	2013 NOV 13 D 3 30
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number L18000097894	ny were filed on APRIL 23, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and contain the words "Limited Lia  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	bility Company," the designation "LEC" or the abbreviation "L.L.C."
(Frincipal office address STOST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	PO BOX 3545
(Mailing address MAY BE A POST OFFICE BOX)	ESTES PARK, CO 80517
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent:  New Registered Office Address:	office address on our records, enter the name of the newere:  Enter Florida street address
	D1 11

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
MBR	EDWARD F. FAIRFAX	DREAM FINDERS REAL ESTATE INVESTORS LLC	Add
		207 DAYTON DRIVE NORTH NORTH WALES, PA 19454	■ Remove
			□ Change
AMBR	SCHAEFER, BRIAN	4830 W. KENNEDY BLVD STE 600 / TAMPA, FL 33609	<b>≅</b> Add
	Note: Please use Separate lines for Street address like		Remove
	W/Arango, Michell.		□ Change
AMBR	ARANGO, MICHELE	4830 W. KENNEDY BLVD STE 600 / TAMPA, FL 33609	
	Note: Simply removing Corp NAME (" TEAM Synergy Exchang, Frc.)	<del></del>	Remove
	Name (" Team Synungy Exchange, Frc.)		
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1766 -45 4 16 4 17 4 17 18	NOVEMBER 6.		
(If an effective date is listed, the date must b Note: If the date inserted in this block document's effective date on the Department.	k does not meet the applicable	(optional) ate of filing or more than 90 days after filing.) Pursuant to 605 statutory filing requirements, this date will not be list	5.0207 (3)(b ed as the
the record specifies a delayed e The 90th day after the recor	effective date, but not and dis filed.	n effective time, at 12:01 a.m. on the earli	er of:
Dated NOVEMBER 6	2018		
Si	gnature of a member or authorized	d representative of a member	
MICHELE ARANGO			
<del></del>	Typed or printed nar	ime of signee	

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Filing Fee: \$25.00