101536

(Re	equestor's Name)			
(Ad	ldress)			
(Äd	ldress)			
(Cil	ty/State/Zip/Phone	e #)		
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COVER LETTER

TO:	Registration Se Division of Cor			
		NNIA CENTER, LLC		
SUBJI	ЕСТ:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
		JOHN A. MORAN, ESQ		
			Name of Person	
		DUNLAP & MORAN, P.A	٨.	
			Firm/Company	
		P.O. BOX 3948		
			Address	·····
		SARASOTA, FL 34230-	3948	
			City/State and Zip Code	
		JMORANSTAFF@DUNL		
		E-mail address: (to be used for future annual report notifi	ication)
For fu	rther information c	oncerning this matter, please ca	ill:	
JOHN	NA. MORAN, ES	Q.	941 366-0115 at ()	
	Name o	f Person		: Telephone Number
Enclos	sed is a check for the	he following amount:		
■ \$2	25.00 Filing Fee	S30.00 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)
	MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZINNIA CENTER, LLC						
(Name of the Lim	(A Florida Limited)	ny as it now appears on our l Liability Company)	r <u>ecords.</u>)			
The Articles of Organization for this Limited Liability Company were filed on 4/25/18 Florida document number L18000101536				and assigned		
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.I	C."		
Enter new principal offices address, if applicable:		C/O JOHN A. MORAN				
(Principal office address MUST BE A STREET ADDRESS)		22 S. LINKS AVE, STE	300	VIG.		
		SARASOTA, FL 3423	6	OIS HO33		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		C/O JOHN A. MORAN	G 10 AM	ETARY OF		
		P.O. BOX 3928		<u> </u>		
		SARASOTA, FL 3423	0			
B. If amending the registered agent and registered agent and/or the new registered of	office address her	<u>e</u> :	cords, <u>enter the name (</u>	of the no		
Name of New Registered Agent:	JOHN A. MOI					
New Registered Office Address:	22 S. LINKS AVE, STE 300					
<u> </u>		Enter Florida street				
	SARASOTA		_, Florida			
		City	Zip Code			

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>	<u>Address</u>	Type of Action
AMBR	John A. Moran	22. S. LINKS AVE, STE 300	B Add
		SARASOTA, FL 34236	□ Remove
			□ Change
MGR	NEIL BEDI	2055 WOOD STREET, STE 100	
		SARASOTA, FL 34237	■ Remove
			□ Change
MGR	INITA BEDI	2055 WOOD STREET, STE 100	
		SARASOTA, FL 34237	
			☐ Change
		·	Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			□ Change

email address for	Annual report notificat	tions is: jmoransta	.ff@dunlapmoran.c	om		
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ffective date is listed, If the date inserte	r than the date of fili the date must be specific a ed in this block does no te on the Department o	and cannot be prior to t meet the applical	date of filing or more	(option than 90 days after fil equirements, this d	ling.) Pursuant to	605.03 listed
	a delayed effective or the record is filed		an effective tin	ne, at 12:01 a.r	n. on the ea	ırlier
d <u>8/1</u>		2018				
	/1/1	un				
	Signature of	a member or author	ized representative of	a member		-

Page 3 of 3

Filing Fee: \$25.00



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John A. Moran, Esq. Dunlap & Moran, PA P.O. Box 3948