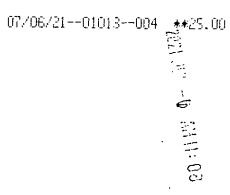
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(City	/State/Zip/Phon	e #)
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COVER LETTER

TO:

Registration Section

Div	Division of Corporations			
CUDICT.	Zolo Direct	LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Alexander Girich		
			Manage Character	
			Name of Person	
			Firm/Company	
		20705 Mountain Whistler	Ave	
		-	Address	
		Venice FL, 34292		
		<u> </u>	City/State and Zip Code	
		mail@alexgirich.com		
			to be used for future annual report no	ntification)
For further in	nformation c	oncerning this matter, please c	all:	
Alexander C	irich		941 303-3935 at ()	
	Name o	f Person		me Telephone Number
Enclosed is a	a check for th	ne following amount:		
■ \$25.00 I	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)
Re	iling Addres	Section	Street Address: Registration S	
	vision of C D. Box 632	orporations 7	Division of Co The Centre of	-
	llahassee, I			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number 1.19000001068	Company were filed on $\frac{06/25/2921}{AG}$.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lir	mited liability company here:
Alex Girich LLC	
The new name must be distinguishable and contain the words "Li	imited 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 ADD	DRESS)
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	2021
(Mailing address MAY BE A POST OFFICE BOX)	
	<u></u>
B. If amending the registered agent and/or register agent and/or the new registered office address here:	red office address on our records, <u>enter the name of the new registero</u> :
Name of New Registered Agent:	
New Registered Office Address:	
· · · · · · · · · · · · · · · · · · ·	Enter Florida street address
	Florida
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Zolo Direct LLC

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 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
			□Add
			□Remove
			□Change
			Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
		<u> </u>	□Add
			□Remove
			□Change
		<u> </u>	□ Add
			Remove
			Change
			□Add
			□Remove
			□ Change

ä	is a marketing business consultant
_	but never went into that field. Since I own the LLC, I'm changing the name to file with my Real Estate Practice
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ம effi ote:	ve date, if other than the date of filing: (optional) (optional)
ecoro	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ted _	06/25/2021

Typed or printed name of signee