119000078910

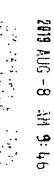
(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	

Office Use Only



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AUG 12 2019 M. SOLOMON



June 10, 2019

ZUETTE HEATHCOTE 1651 SW 21 AVE MIAMI, FL 33145

SUBJECT: AZ ASSETS, LLC Ref. Number: L19000078910

We have received your document for AZ ASSETS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you're amending name please revise Section A of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 319A00011583

AUG 0 8 2019

COVER LETTER

TO: R	egistration Sec ivision of Corp	tion * porations		• •		
SHRIFCI	AZ ASSETS					
30001201	·		ned Liability Company			
The enclos	sed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please retu	ırn all correspor	ndence concerning this matter	to the following:			
		ZUZETTE HEATHCOTE				
			Name of Person			
			Firm/Company			
		1651 SW 21 AVENUE				
		MIAMI, FLORIDA, 3314	Address			
		zuzette1007@gmail.com	City/State and Zip Code			
			to be used for future annual report notif	ication)		
		oncerning this matter, please ca E	305 495-9844			
		Telephone Number				
Enclosed i	is a check for th	e following amount:				
\$25.00) Filing Fec	□ \$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

AZ ASSETS LLC				
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)			
The Articles of Organization for this Limited Liability Company w Florida document number	ere filed on 03/21/2019	and as	signed	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here:			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviation "l	"IC,"	
Enter new principal offices address, if applicable:			2	
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>	
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		773	<u>_</u>	· .
Enter new mailing address, if applicable:		123	<u> </u>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		歌文:	جب	<u> </u>
		की ।	94	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, <u>ent</u>	er the name	of the	е пеж
Name of New Registered Agent:		-		 -
New Registered Office Address:	Enter Florida street address			
	, Florida	Zin 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
AMBR	ALEXANDER TAMARGO	1936 SW 13 STREET	
		MIAMI, FLORIDA, 33145	□ Remove
			☐ Change
			Add
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			Change
 			
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ective date, if other than the	late of filing: _			(0	ptional)	
reffective date is listed, the date must te: If the date inserted in this blo	be specific and car	mot be prior to	date of filing or	more than 90 days	after filing.) Pursuan	
cument's effective date on the De	partment of State	e's records.				
record specifies a delayed	effective dat	e, but not a	an effective	time, at 12:0)1 a.m. on the	earlier -
he 90th day after the reco						
MAY 20		2019				
			. •			
	Signature of a men	ther ar authori	and representation	ve of a member		

Page 3 of 3

Filing Fee: \$25.00