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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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2019 AUG 22 PM 4: 16 SECKLAND SECRETARY

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COVER LETTER

SUBJECT:	ZANIAH BUSINESS LLC			
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Alexandra Lopez		
		AES ACCOUNTING & C	Name of Person FONSULTING LLC	
		6965 PIAZZA GRANDE . STE. 314	Firm/Company AVE	<u></u>
		ORLANDO, FL 32835	Address	
		admin@aesaccounting.net	City/State and Zip Code	
For further ir	nformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report notifiall:	ication)
Alejandra Le	<u> </u>		407 530-0958 at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$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:

TO:

Registration Section Division of Corporations

> 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**

(<u>Name of the Limited I</u> (A	Liability Compa Florida Limited	iny as it now appears on our records Liability Company))
The Articles of Organization for this Limited Liabi Florida document number $\frac{L19000143448}{L19000143448}$	ility Company 	were filed on 05/29/2019	and assigned
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liab	ility company here:	
The new name must be distinguishable and contain the word	s "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	6965 PIAZZA GRANDE AVE	STE. 314
(Principal office address MUST BE A STREET A		ORLANDO, FL 32835	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	6965 PIAZZA GRANDE AVE: ORLANDO, FL 32835	2019 AUG 22 TALLAHAS
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of e address her	ffice address on our records. <u>e</u> :	SS 1-
Name of New Registered Agent:	AES ACCOUN	TING & CONSULTING LLC	
New Registered Office Address:	5965 PIAZZA (GRANDE AV, STE. 314	
-		Enter Florida street address	
(Orlando	. Flo	rida <u>32835</u>
-		City	Zip Code

ZANIAH BUSINESS 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 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
MGR	Monica Costa Armond	5607 Water Rose Road	
			B Add
		Winter Garden-FL 34787	☐ Remove
			
			Change
			□ Remove
			Change
		-	Add
			□ Remove
			Change
			☐ Remove
			Change
			Add
			☐ Remove
			Change
			Add
			Remove
			☐ Change

	·····
	
(If an e Note	e date, if other than the date of filing:
the re) Th	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 00th day after the record is filed.
Date	PUGUST 16 7019

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00