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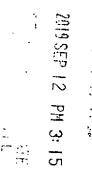
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# **COVER LETTER**

TO:	Registration Secti Division of Corpo			
SUBJI	ECT: ZINA	HOLDINGS	S LLC	
		Name of Limi	ited Liability Company	
		<b>'₩</b>		
The en	closed Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please	return all corresponde	ence concerning this matter	to the following:	
		Debra	Buccinng	
		TIWA HOLD INGS LLC  Name of Limited Liability Company  Ticles of Amendment and fee(s) are submitted for filing, correspondence concerning this matter to the following:   Debra Buccing  Name of Person  Firm/Company  10 Willow brook lane apt 105  Address  Delray Beach, FL 33446  City/State and Zip Code  Debra Buccing  E-mail address: (to be used for future annual report notification)  mation concerning this matter, please call:  Ca Buccing  Name of Person  at (SI) 777-00 100  Name of Person  Daytime Telephone Number		
			Firm/Company	
		State   Stat		
SUBJECT: ZINA HOLD INGS LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filling.  Please return all correspondence concerning this matter to the following:  Debra Buccing  Name of Person  Finn/Company  10 Willow Brook Lanc apt 105  Address  Delray Beach FL 33446  City/State and Zip Code  Debra Buccing  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Debra Buccing  Name of Person  at (Sti) 777-00 100  Area Code Daytime Telephone Number  Enclosed is a check for the following amount:  Enclosed is a check for the following amount:  S25.00 Filing Fee \$\Bigcia \$30.00 Filing Fee & Certificate of Status  Certificate of Status  Certificate of Status  Certificate Opy  (additional copy is enclosed)				
		Diray ela	City/State and Zin Code	6
		Debrabo	och @ Yahoo,	Comv
	-	E-mail address: (t	to be used for future annual report noti	fication)
For fur	ther information cond	erning this matter, please ca	ill:	
	Debra Bu	CCINN 9	at (561) 777-	00 10
	runic of 7		Area Code Dayeiiii	e reteptione Number
Enclose	ed is a check for the f	following amount:		
<b>X</b> \$2:	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Zing Holdings LLC

(A Florida Lii	mited Liability Company)
The Articles of Organization for this Limited Liability Corr Florida document number <u>L 19000175 3 4/</u> .	inpany were filed on $\frac{JU/y}{17/20/9}$ and assigned
This amendment is submitted to amend the following:	2019 SEP
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation L.L.G.
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES	SS) 14852 Wild Flower Lane Delray beach, FL 33446
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14852 Wild Flower Lane Delray Beach, FL 33446
registered agent and/or the new registered office addres	red office address on our records, enter the name of the new shere:  Shory BUCCINNG
New Registered Office Address: 10	Enter Florida street address  (Cay beach, Florida 33446
	/ City Zip 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>	<u>Address</u>	Type of Action
	<del></del>		Add
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f an effi <mark>Note:</mark>	ve date, if other than the date of filing:
e rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated	<u>Sept 10. 2019.</u>
	Sept 10, 2019.  Out Buccouse  Signature of a member or authorized representative of a member
	Debrg Buccing 9  Typed or printed name of signee