LZ0 000039261

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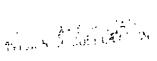
COVER LETTER

TO:		stration Sect sion of Corpo				
CHD III		Zinderela LL	С		•	
SUBJE	W. I.		Name of Lim	ited Liability Company	- · · · · · · · · · · · · · · · · · · ·	
The end	closed	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return	all correspond	dence concerning this matter	to the following:		
			lehuda Tznder			
			_	Name of Person		
				Firm/Company		
			1301 Funsion Street			
				Address		
			Hollywood, FL 33019			
			jtzmiami2@hotmail.com	City/State and Zip Code		
			E-mail address: (to be used for future annual i	report notification)	
For furt	ther in	formation con	cerning this matter, please ca	alf:		
Ieduda	Tzyno	ler		954 448 at ()	8-8088	
		Name of I	⁹ erson	Area Code	Daytime Telepho	one Number
Enclose	ed is a	check for the	following amount:			
■ \$25	5.00 Fi	ling Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



21 MAY 24 AH 10: 50

Zinderela LLC

(Name of the Limited Liability Company as it now appears on our records.)

тут попов слищент.	ratinity Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000039261</u> .	were filed on 02/04/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>e</u>	nter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		, FloridaZip 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 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

21 MAY 24 AM 10: 50

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Amir Zinder	1301 Funston Street	□Add
		Hollywood, FL 33019	■Remove
			Change
MGR	Boaz Vaknin	1301 Funston Street	= Add
		Hollywood, FL 33019	🗀 Remove
			□Change
			□Add
			□Remove
			☐ Change
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fective date, if other n effective date is listed, to te: If the date inserted cument's effective date	the date must be specific d in this block does no	and cannot be prior of meet the applica	to date of filing or me	(option of than 90 days after requirements, this	onal) filing.) Pursuant to 605.0207 date will not be listed as
ecord specifies a delay- is filed.	ed effective date, but i	not an effective tir	me, at 12:01 a.m. o	n the earlier of: (b	The 90th day after the
ted		2021			
	/	?			
	Signature of	a member or autho	rized representative c	of a member	

Filing Fee: \$25.00