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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Hermancia Seudy Name of Person	
Zetailz LLC Firm/Company	
201 woodland Rd. Address	
Palm Spring FL 33461 City/State and Zip Code	20
E-mail address: (to be used for future annual report notification)	20 AUG 1
For further information concerning this matter, please call:	B P
Hermancia Seudy at 361 767-5479 Name of Person Area Code Daytime Telephone Number	2020 AUG 18 PM 5: 40 TALLAHASSES. FL
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	te of Status &

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now apper (A Florida Limited Liability Company	rars on our records.)
The Articles of Organization for this Limited Liability Company were filed on _ Florida document number	July 27, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	here:
The new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the abbreviation "LL.C."
Enter new principal offices address, if applicable:	2020 T
(Principal office address MUST BE A STREET ADDRESS)	10 H
	<u> </u>
	SS P
Enter new mailing address, if applicable:	The or
(Mailing address MAY BE A POST OFFICE BOX)	
	
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, enter the name of the new registered
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
Enter F	lorida street address
Cirv	, Florida 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 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	Hermancia Seudy	201 woodland Rd. Palm 5	SI PES UP Add
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lfan eff <u>Note:</u>	ive date, if other than the date of filing:
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	7070
Dated	$\mathcal{L}(\mathcal{L}(\mathcal{L}))$
Dated	Hernen va Signature of a member or authorized representative of a member He (mancia Jendy) Typed or printed name of signee

Filing Fee: \$25.00