## LZO 000387571

(Requestor's Name)		
(Address)		
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

	ision of Co		• •	• :		
SUBJECT:		Ifiliment, LLC	, <b>6</b>			
SOBJECT:		Name of Lin	nited Liability Company	·····		
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		Alyce Schreiber				
			Name of Person			
	Three Z Fulfillment, LLC (TAP Fulfillment, LLC)					
	Firm/Company					
	20900 NE 30th Avenue, 8th Floor					
	Address					
	Aventura, FL 33180					
			City/State and Zip Code			
		aschreiber@tap-advisory.co				
For further i	nformation c	E-mail address: ( oncerning this matter, please c	to be used for future annual report no all:	otification)		
Alyce Schre	iber		305 586-8216			
	Name o	f Person	at () Area Code Dayti	me Telephone Number		
Enclosed is	a check for th	he following amount:				
<b>■</b> \$25.00	Filing F <del>e</del> e	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 500 Status & Certificate of Status & Certified Copy (additional copy is enclosed)		
	iling Addres		Street Address:	antina		
Registration Section Division of Corporations			Registration Section Division of Corporations			
P.0	D. Box 632	.7	The Centre of	The Centre of Tallahassee		
Та	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Three Z Fulfillment, LLC

company has been notified in writing of this change.

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

	Dec	amber 11, 2020	
The Articles of Organization for this Limited Liability Company	y were filed on Dec		and assigned
Florida document number L20000387571			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	pility company her	<u>re</u> :	
TAP Fulfillment, LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the de	signation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<del></del>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office	address on our re-	cords, <u>enter the nan</u>	ne of the new registere
agent and/or the new registered office address here:			
N CN B I A			
Name of New Registered Agent:			
New Registered Office Address:		da street address	
	Enter Florid	da street address	
		, Florida	2: 6 !
	•		лір Соде
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performance of r provided for in Cl	ny duties, and I am hapter 605, F.S. Or,	familiar with and if this document is

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	2021 FEB -3	Při 5: 28	Type of Action
	***			· .	
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Effective date, if other than the date of filin (If an effective date is listed, the date must be specific an Note: If the date inserted in this block does not document's effective date on the Department of	nd cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3), meet the applicable statutory filing requirements, this date will not be listed as the
ne record specifies a delayed effective date, but no ord is filed.	ot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated February I	2021
Signature of a	member or authorized representative of a member
Alyce Schreiber	·
Myce Schieber	Typed or printed name of signee

Filing Fee: \$25.00