L21000068732

(Requestor's Name)
(Address)
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(100,000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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O SIMMONS MAR 3 1 2021

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 03/30/2021		**WALK	[N##
ENTITY NAME ZWEER	ES LLC		
DOCUMENT NUMBER_			
	PLEASE FILE THE ATTACHED AND RETURN		
XXXX	Plain Copy Certified Copy Certificate of Status	** , 2 ₄	411
#	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments		
	APOSTILLE' / NOTARIAL CERTIFICATION	 -	
COUNTRY OF DESTINAT NUMBER OF CERTIFICAT	70N	_	
TOTAL OWED \$25.00	ACCOUNT #: I20160000072		
Please call Tina at th	e above number for any issues or concerns. Thank you so n	nuch!	

COVER LETTER

	gistration Se vision of Cor				
ello incer.	Zweeres Ll				
SUBJECT:			nited Liability Company		
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retur	n all correspo	ondence concerning this matter	to the following:		
		Shama Stepp c/o ZenBusi	ness PBC		
			Name of Person	<u> </u>	
		ZenBusiness PBC			
			Firm/Company		
		5900 Balcones Dr., Suite 5	5000		
Address					
		Austin TX 78731			
			City/State and Zip Code		
		fultillment@zenbusiness.co			
		E-mail address: (to be used for future annual report no	tification)	
For further i	information c	oncerning this matter, please c	all:		
Shama Step	p		844 493-6249		
	Name o	f Person	Area Code Daytii	me Telephone Number	
Enclosed is	a check for tl	te following amount:			
■ \$25.00	Filing 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)	
	uling Addres		Street Address:	aution.	
	gistration S vision of C	orporations	Registration Se Division of Co		
P.0	O. Box 632	7		The Centre of Tallahassee	
Ta	llahassee, I	FL 32314	2415 N. Monre	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

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

	· ·· ·
The Articles of Organization for this Limited Liability Company	were filed on 02/09/2021 and assigned
Florida document number L21000068732	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2120 Corporate Square Blvd
Principal office address MUST BE A STREET ADDRESS)	Suite 23
	JACKSONVILLE, FL 32216
Enter new mailing address, if applicable:	2120 Corporate Square Blvd
Mailing address MAY BE A POST OFFICE BOX)	Suite 23
	JACKSONVILLE, FL 32216
3. If amending the registered agent and/or registered office a	nddress on our records, <u>enter the name of the new registered</u>
gent and/or the new registered office address here:	
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
	Enter Florida street address
	, Florida
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	

Zweeres 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

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2021 HAR 30	AH 9: 39

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	John J Bombardier	853 Southern Creek Dr	≡ Add
		Jacksonville, FL 32259	□Remove
			. ja do o
			
			: □Remove
			□Add
			☐Remove
		-	□Add
			□Remove
			☐ Change
			□Add
			□Remove
		<u> </u>	
			□Add
			□Remove
			∏Chanve

	r change(s) here: (Attach additional sheets, if necessary.)
	2621 HAR 30 AH 9: 39
	
(If an effective date is listed, the date must be specific	ling:(optional) and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 ot meet the applicable statutory filing requirements, this date will not be listed as the of State's records.
he record specifies a delayed effective date, but ord is filed.	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2021
/s/ Raymond L7weeres	
/s/ Raymond L7weeres	of a member or authorized representative of a member

Filing Fee: \$25.00