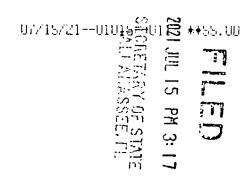
L21000110228

(Request	or's Name)
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PICK-UP	WAIT MAIL
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(Docume	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:





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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ZLOHIM PROPERTI	ES AND TRANSPORTAION Ed Liability Company
The enclosed Articles of Amendment and fee(s) are submit Please return all correspondence concerning this matter to	
ZANETA E	Name of Person
ZLOHIM PRO	PERTIES AND TRANSPORTATION
1317 EDGEN	NATER DR. SUITE 338 2 2
DRLANDO,	FL 32804 City/State and Zip Code
E-mail address: (to	be used for future annual report notification)
ZAVETA BALLEY Name of Person	at (<u>16316</u>) <u>288-8316</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$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 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32314	2410 N. MOHOC SHEEL, SHIE OID

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZLOHIM PROPERTIES AND TRANSPORTATION
(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 MARCH 3, 2021 and assigned Florida document number L21000110228.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited I	iability company here:	
ZLOHIM TRANSPORTAT	ION LLC	
The new name must be distinguishable and contain the words "Limited L	iability 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)	2	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		H 3: 17
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our records, e	nter the name of the new registered
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street d	address
		. Florida
	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>	Address	Type of Action
AMBR	ZANETA BAILEY	1317 EDGEWATER DR.	[T /Add
		Suite 3386	□Remove
		DRLANDO, FL 3280L	□Change
AMBR	SCOTTY LEE	1317 EDGEWATER DR	. □Add
	•	Suite 3386	□Remove
		DRLANDO, FL 32804	i\(\frac{1}{2}\)Change
		CO TEN TEN TEN TEN	Add 22 Remove
		TSSTE. TAIL	File Remove
			□Remove
			□Change
			□Add
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an effective date is listed, the local structured in focument's effective date of	this block does not mee	et the applicable	statutory filing re	quirements, this	date will not be	listed as
ocument 3 checkive date o	ii iii isopai iii ii					
record specifies a delayed is filed.	effective date, but not an	effective time,	at 12:01 a.m. on t	he earlier of: (b)) The 90th day a	fter the
pated JULY 10	,2021					
			d representative of a	_		

Filing Fee: \$25.00