## LZ1000 159585

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## **COVER LETTER**

TO: Registration So Division of Col				
	SERVICES LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	ZANIA YANES			
	Name of Person			
	Z	YANES SERVICES LLC		
	<u> </u>	Firm/Company		
		5481 MARIN ST		
		Address		
		NAPLES FL 34113		
		City/State and Zip Code		
		O@SMARTUPACCOUNT.COM		
	E-mail address: (	to be used for future annual report no	tification)	
For further information of	concerning this matter, please c	all:		
ZANIA YANES		239 302-9111 at ()		
Name o	of Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for t	he 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)	
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection	
Division of Corporations		Division of Corporations		
P.O. Box 63: Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810	

Tailahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Z YANES SERVICES LLC

2022 MAY -7 AH 6:49

(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  $\frac{04/02/2021}{2}$ 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 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: (Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

## 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 2022 FAY -7 AH 6: 49	Type of Action
AMBR	ZANIA S YANES CANALES	5481 MARTIN ST	
		NAPLES FL 34113	□Remove
			Change
MGR	ZANIA YANES	5481 MARTIN ST	□Add
		NAPLES FL 34113	<b>≡</b> Remove
			Change
			🗀 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			🗆 Add
			□ Remove
			□ Change
			□Add
			□ Remove
			Change

CHANGE NAME: FROM	ZANIA YANES	2022 MAY -7 AM 6: 49
ТО	ZANIA S YANES CANALES	
	- <del> </del>	
effective date is listed, the date must	ck does not meet the applicable statute	(optional) ling or more than 90 days after filing.) Pursuant to 605,020 ory filing requirements, this date will not be listed a
cord specifies a delayed effective s filed.	date, but not an effective time, at 12:0	H a.m. on the earlier of: (b) The 90th day after th
ed APRIL 30	2021	
Ź	2an. 95. Yanes.	Lanales. sentative of a member