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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Zenco Investments UC	
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
TUAN Nguyen	
Nâme of Person	
Firm/Company	
19113 NE 8th CT	
Address	
MIAMI FL 33179  City/State and Zip Code  TNGUY ØØ 3 @ 9MGI 1.10M  E-mail address: (to be used for future annual report notification)	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (954) 558 - 2016  Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$525.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$555.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee. Certificate of Status \$\Bigcup \$certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)	
Mailing Address:  Registration Section  Street Address:  Registration Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	
Tallahassee, FL 32314 2413 N. Monroe Street, Street 810 Tallahassee. FL 32303	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	-NUEST MEATS	ny as it now appears on our	records,)
The Articles of Organization for this Limited L	iability Company		
This amendment is submitted to amend the foll	owing:		
NIO			
The new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:	NIV	
(Name of the Limited Liability Come (A Florida Line)  The Articles of Organization for this Limited Liability Come Florida document number			
Enter new mailing address if applicable		NIA	" \(\omega\) \(\omega\
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		ddress on our records,	enter the name of the new registere
Name of New Registered Agent:	MIA		
Nany Registered Office Address	NIA		
New Registered Office Address.		Enter Florula street	address
			. Florida
		Ciţy	Zıp Code
New Registered Agent's Signature, if changing l	Registered Agent:		
	er and complete istered agent as p registered office	performance of my duti provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
	N If Chan		ature 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
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