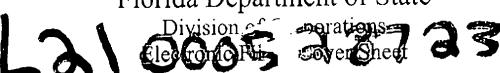
Florida Department of State



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000336380 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAP SOLUTIONS INC

Account Number : I20210000103

Phone

: (786)615-3057

Fax Number : (786)615-3058

\*\*Enter the email address for this business entity to be used for future Tannual report mailings. Enter only one email address please.\*\*

Email Address: info@tapsolution.net

C. BRUMBLEY

ВB

## LLC AMND/RESTATE/CORRECT OR M/MG REŠIGI ZAPATA LAWN SERVICE LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZAPATA LAWN S	<del>-</del>		
(Name of the Limits	d Liability Company as it now appear A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Lin	ability Company were filed on	12/15/2021	and assigned
Florida document number <u>L21000528723</u>	<u>.                       </u> .		
This amendment is submitted to amend the following	wing:		
A. If amending name, enter the new name of	the limited liability company h	ere:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the	designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applica			
. ,			\$ 2
(Principal office address MUST BE A STREE	I ADDRESS)		<u>₹</u> 0
			- ∰ - S - <u>-</u>
Enter new mailing address, if applicable:			<u> </u>
(Mulling address MAY BE A POST OFFICE I	<u> </u>	<u>-</u>	<u> 유유 골                                 </u>
	<del></del>		
			50
B. If amending the registered agent and/or reagent and/or the new registered office address		records, enter the nar	me of the new register
Name of New Registered Agent:	VICTOR HERRERA-E	BRIONES	
New Registered Office Address:	312 CULTURAL PAR		
	· Enter Flo	rida street address	
	CAPE CORAL	, Florida _	33990
	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

Title	Name	Address	Type of Action
MGR_	FRANCISCA ZAPATA AGUILERA	312 CULTURAL PARK BLVD	🗆 Add
		CAPE CORAL, FL 33990	⊠Remove
			Change
AMBR	VICTOR HERRERA-BRIONES	312 CULTURAL PARK BLVD	
		CAPE CORAL, FL 33990	Remove
			□Change
	<del></del>		🗅 Add
			□Remove
			Change
-			🗆 Add
			□Remove
			□ Change
			□Add
			🗆 Remove
			Change
			🗀 Add
			□Remove
			□Change

	·
F Fffce	tive date, if other than the date of filing: (optional)
Note:	tive date, if other than the date of filing:  (optional)  (fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)  (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
If the reco record is t	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	SEPTEMBER 29 . 2022
	Signature of a member of authorized representative of a member
	VICTOR HERRERA-BRIONES

Typed or printed name of signee