L2200011571

(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boothiche (Vallager))
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO: Registration S Division of Co				
	ZA SHOPS INVESTORS, L.L	C.		
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:		
	ROSEMARIE BACALLA	.O, ESQ.		
		Name of Person		
	FROMBERG, PERLOW	& KORNIK, PA.		
		Firm/Company	-	
	20295 NE 29 PLACE SUI	TE 200		
		Address		
	AVENTURA, FL 33180			0 Filing Fee, ficate of Status &
		City/State and Zip Code		
	RBACALLAO@FPK-LAV			5
	E-mail address: (to be used for future annual report	notification)	
For further information of	concerning this matter, please co	all:		
ROSEMARIE BACALLAO		305 933-2000 at ()	0	. с
Name o	of Person	Area Code Day	ytime Telephone Number	
Enclosed is a check for t	he following amount:			1 1
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status & Copy
Mailing Address Registration S Division of C	Section Corporations	Street Address Registration Division of G	Section Corporations	
P.O. Box 632	7	The Centre of	of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

n our records.)
4/2022 and assigned
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gnation "LLC" or the abbreviation "L.IC."
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- <u>cn</u>
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rds, enter the name of the new registe
street address
, Florida

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>	Name	Address	Type of Action
			□Add
			□Remove
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			□Add
			□ Remove
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fective date, if other than the date of filing:		(optional)	
on effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable state			
ocument's effective date on the Department of State's records.	, , ,		
ecord specifies a delayed effective date, but not an effective time, at 12 is filed.	2:01 a.m. on the earlier	of: (b) The 90th day	after the
1			
med MARCH 22, 2023			
MARCH 22, 2023			