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## **COVER LETTER**

Registration Section Division of Corporations

ZERO ROAD LLC SUBJECT: 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: VICTOR E. MANCEBO Name of Person O2 NATURAL AIR LLC Firm/Company 5846 SOUTH FLAMINGO ROAD, SUITE 1210 Address COOPER CITY, FL. 33330 City/State and Zip Code VICTOR.E.MANCEBO@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: VICTOR E. MANCEBO Name of Person Enclosed is a check for the following amount: □ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ■ \$60.00 Filing Fee. Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: **Mailing Address:** Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZERO ROAD LLC

company has been notified in writing of this change.

(A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000043596</u>	were filed on 01/24/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
O2 NATURAL AIR LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	5846 SOUTH FLAMINGO ROAD	22
(Principal office address MUST BE A STREET ADDRESS)	SUITE 1210	<b>≥</b> 50 c
	COOPER CITY, FL. 33330	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	5846 SOUTH FLAMINGO ROAD	9 PH 12:
	SUITE 1210	မ္လ
ONIBIONY BUBIESS (VIALE DE A FONT OFFICE DOA)		
Mulling duaress MAT BE A FOST OFFICE BOX)	COOPER CITY, FL. 33330	
B. If amending the registered agent and/or registered office		e of the new regis
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:		e of the new regis
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		e of the new regis
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter the nam	zip Code

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

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	MANCEBO, DEBRA M.	5846 SOUTH FLAMINGO ROAD, SUITE 1210	🗆 Add
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ective date, if other than the date of filing a specific and a spe	ng: (optional) nd cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605	5.020
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cument's effective date on the Department of	State's records.	
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ecord specifies a delayed effective date, but no is filed.	ot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte	er un
AUGUST 13	2022	
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Signature of a	a member or authorized representative of a member	
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