L22000056606

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COVER LETTER

TO: Registration Division of C			
IZENZA	LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	MARIANA D PEREZ		
		Name of Person	
		Firm/Company	
	9290 RANDAL PARK BI	LVD UNIT 20121	20
		Address	72 EE
	ORLANDO, FL 32832		£ 27
	IZENZACO@GMAIL.CO	City/State and Zip Code M	ation)
For further information	E-mail address: (n concerning this matter, please c	to be used for future annual report notific	ation)
MARIANA D PEREZ	-	786 9063969 at ()	
Nam	e of Person		Telephone Number
Enclosed is a check fo	r the 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)
Mailing Add Registration		Street Address: Registration Secti	ion
Division of	Corporations	Division of Corpo	orations
P.O. Box 6 Tallahassee	327 e, FL 32314	The Centre of Tal 2415 N. Monroe	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IZENZA LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our record iability Company)	<u>(s.</u>)
he Articles of Organization for this Limited Liability Company	were filed on <u>02/02/2022</u>	and assigned
lorida document number L22000056606		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC	" or the abbreviation "L.L.C."
man and a simple of the state o		
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		- 38 8
		27
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		Press.
		; 7
. If amending the registered agent and/or registered office a	ddress on our records, <u>enter</u>	the name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Augustica C. Mod Pada Cong.	Enter Florida street addres.	s
	ជា	orida
	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 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>	<u>Address</u>	Type of Action
AMBR	JUAN P MENESES	9290 RANDAL PARK BLVD UNIT 20121	□Add
		ORLANDO, FL 32832	🗆 Remove
			🗏 Change
MGR	TONIA E PERAZA	9290 RANDAL PARK BLVD	🗆 Add
		ORLANDO, FL 32832	🖩 Remove
			□ Change
			□Add
			2022 Remove
			□ Change
			□ Add
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ective date, if other than the effective date is listed, the date mus te: If the date inserted in this blument's effective date on the De	ock does not meet the	applicable statu	filing or more than story filing require	(option 00 days after firements, this o	iaf) ling.) Pu late wil	rsuant to 1 not be	605.026 listed a
cord specifies a delayed effective s filed.	e date, but not an effec	ctive time, at 12	:01 a.m. on the ea	arlier of: (b)	The 9	Oth day	after th
ed	2022						
		/////	_				_
	Signature of a member	or authorized repi	esentative of a men	ıber			