## L22000078935

(Requestor's Name)			
(Ac	idress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	e #)	
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2022 MAR 16 AM 7: 21
SECRETARY OF STATE

A. BUTLER MAR 3 0 2022

## **COVER LETTER**

TO: Registration Se Division of Cor					
ZTOPS EN	TERPRISES LLC				
SUBJECT:  Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following.			
	Michael Dempsey				
		Name of Person			
	ZenBusiness Inc.				
		Firm Company	**** <del>***</del>		
	5511 Parkerest Drive Suite				
		Address	<del></del>		
	Austin, Texas, 78731				
		City State and Zip Code			
	fulfillment@zenbusiness.co	om to be used for future annual report not			
For further information of	f -mail address. ( oncerning this matter, please c		(Higation)		
Michael Dempsey c/o Ze	enBusiness Inc.	844 493-6249 at()			
Name o	l'Person	Vica Code Daytir	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	TI \$30.00 Filing Fee & Certificate of Status	Ti \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration 9		<u>Street Address:</u> Registration Se	etion		
Division of Corporations		Division of Corporations			
P.O. Box 632 Tallahassee, 1			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ZTOPS ENTERPRISES LLC

2022 MAR 16 AM 7:21

(Name of the Limited Liability Compa (A Florida I mited)	ny as it now appears on our ree liability Company)	TALE MENAGUE STATE
The Articles of Organization for this Limited Liability Company Florida document number 1.22000078935		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "I mute all labi	hty Company "the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10535 Marina Way	
(Principal office address MUST BE A STREET ADDRESS)	BOCA RATON, FL 33428	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
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, <u>en</u>	ter the name of the new registere
New Registered Office Address:	Caran Manual Carana and	denes
	Emer Florida street address	
	Car.	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties provided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is
If Cha.	nging Registered Agent, Signatu	re 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>	<u>Address</u>	Type of Action
AMBR	DIMITRI ZAMBRANA	10535 Marina Way	□Add
		BOCA RATON, FL 33428	
			■Change
			□Add
			□Remove
			□Change
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	ist be specific and cannot be prior to colook does not meet the applicable	(option date of filing or more than 90 days after fil e statutory filing requirements, this d	ing.) Pursuant to 605.0207 (3)(1
f the record specifies a delayed effecti ecord is filed.	ve date, but not an effective time	, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated March 10	2022		
ISI DIMITRI ZAM	IRDANIA		
	Signature of a member or authorize	ed representative of a member	
DIMITRI ZAMBRAN			
<del></del>	Typed or printed r	name of signee	<del></del>

Filing Fee: \$25.00