(Re	equestor's Ñame)	<u>.                                      </u>
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
	usiness Entity Na	me)
(DC	Joine 33 Emily 14an	me,
(Do	ocument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
·	•	
L		

Office Use Only



000387225670

N -6 AR 6: 39

NARY OF STATE

05/06/22 -- 0167



A. BUTLER MAY - 9 2022

## **COVER LETTER**

TO: Registration Division of C			
ZI WIRI	ELESS LLC		
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	ibmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
	IMRAN RAZA		
		Name of Person	
		Firm/Company	<del></del>
	3277 LAGO DE TALAV	ERA	
		Address	
	WELLINGTON, FL 3346	57	
	ali@advantage.cpa	City/State and Zip Code	
		to be used for future annual report noti	ification)
For further information	concerning this matter, please o	•	
IMRAN RAZA		561 635-0392	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he 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 Addres		Street Address:	
Registration S		Registration Sec	
Division of C		Division of Corp	
P.O. Box 6327 The Centre of Tallahassee		allahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ZI WIRELESS LLC		2022 HAY -6 AM 6: 39
The Articles of Organization for this Limited L Florida document number L22000149638		Liability Company) SECRETARY OF STATE
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liab	pility company here:
ZI WIRELESS LLC		
The new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	3277 LAGO DE TALAVERA
(Principal office address MUST BE A STREE	WELLINGTON EL 22467	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	3277 LAGO DE TALAVERA WELLINGTON, FL 33467
B. If amending the registered agent and/or reagent and/or the new registered office address  Name of New Registered Agent:		address on our records, enter the name of the new registered
New Registered Office Address:	3277 LAGO DI	E TALAVERA
1750 Registered Office Address.		Enter Florida street address

## 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.

City

WELLINGTON

If Changing Registered Agent. Signature of New Registered Agent

. Florida <u>33467</u>

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
MGR	IMRAN RAZA	3277 LAGO DE TALAVERA	□Add
	WELLINGTON, FL 33467	□Remove	
		<del> </del>	■Change
	· · · · · · · · · · · · · · · · · · ·	·	
			□Remove
			□ Change
			□Add
			□Change
			□Add
			□Remove
			Change
<del></del>			□Add
		<del></del>	□Remove
			□Change
			□Remove
			□Change

	<del></del>	<del></del>	<del></del>	<del></del>	
		<del></del>			
					<del></del>
		·······			
<del></del>					
		<u> </u>			<del></del>
	<u>.                                    </u>				
					<del></del>
<del></del>		<del></del>			<del></del>
<u>-</u>	<u></u>				
<del></del>	<del></del>	<del></del>		<del> </del>	
ffective date, if other that an effective date is listed, the diote: If the date inserted in ocument's effective date on	ate must be specific and this block does not r	d cannot be prior to da neet the applicable	ate of filing or more that statutory filing requ	(optional) in 90 days after filing.) Pur irements, this date will	suant to 605.0207 (3)( not be listed as the
record specifies a delayed e is filed.	ffective date, but not	an effective time,	at 12:01 a.m. on the	earlier of: (b) The 90	th day after the
April 5th		2022			
	Dan Red	·			
<del></del>	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		representative of a m		<del></del>

Filing Fee: \$25.00