122000164962

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
—		—
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2022 JUL 21 AM 11: 27

COVER LETTER

Division of Corp	oorations		·
SUBJECT: ZIN		F Bounce LL ted Liability Company	<u> </u>
	rune of Enn	ted Elability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspor	ndence concerning this matter t	to the following:	
	Danzella	Name of Person	·-···-
		Name of Person	
	Zin's House	P OF BOUNCE L	LC
		Firm/Company	
	4315 N. 25	7th Street	
		Address	
	T2:02 F	51 22101 M	
	10001	FL 3361 Ø City/State and Zip Code	
	A Lexis Zin E-mail address: (to	o be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	II:	
Dan Zoll Name of	Zinermon Person	at (<u>813</u>) <u>525 - 8</u> Area Code Daytime	390Z Telephone Number
Enclosed is a check for the	e following amount: \$\infty \section \	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

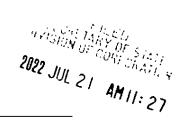
TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



Zin's House of Bounce Lac (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	were med on	22 and assigned
Florida document number <u>L22000164962</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi		
Zin's Hauling LkC The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records,	enter the name of the new registered
New Registered Office Address:	Enter Florida street	
	enter riorida street	
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Ciņ	Zip Code

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
			□Change
			□Add
			Remove
		 	Change
			□Add
			Remove
			□Add
			□ Remove
			□Change
 			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change

f amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Authorized Managers should stay the
	Same. Please don't change or remove.
	- Thanh you
	ער
	2-
-	A
n effecti ote: If	date, if other than the date of filing:
ecord s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft
ited	July 19th 2022. Signature of a heather or authorized representative of a member
	Danzell S. Zinarmon Typed or printed name of signee

Filing Fee: \$25.00