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SECRETARY OF STATE TALLAHASSEE, FL

2022 AUG 31 AM 11: 19

COVER LETTER

TO: Registration : Division of Co						
	WORLD LLC					
SUBJECT:	Name of Limi	ited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.				
Please return all corres	pondence concerning this matter	to the following:				
	VICTOR DE LAS HERAS	i				
		Name of Person				
	ZAMNA WORLD LLC					
		Firm/Company				
	6303 BLUE LAGOON DR	RIVE, SUITE 200				
		Address				
	MIAMI, FL 33126					
		City/State and Zip Code				
	EBALTAR@GLSCCPA.CO	OM to be used for future annual report no	uification)			
			meanon			
For further information	n concerning this matter, please ca	all:				
VICTOR DE LAS HERAS		305 373-0123 at ()				
Name	e of Person	at () Area Code Daytin	ne Telephone Number			
Enclosed is a check for	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 Fec. Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Add		Street Address:				
Registratio	n Section Corporations	Registration Section Division of Corporations				
P.O. Box 6	-		The Centre of Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZAMNA WORLD LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{06/01/2022}{1}$ and assigned Florida document number 1.22000251062 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Ltability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: VICTOR DE LAS HERAS Name of New Registered Agent: 6303 BLUE LAGOON DRIVE, SUITE 200

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

MIAMI

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

. Florida 33126 Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ENZO MAZZA	106 SE 9TH STREET	□Add
		FORT LAUDERDALE, FL 33316	■Remove
		 	□Change
MGR	VICTOR DE LAS HERAS	6303 BLUE LAGOON DRIVE, SUITE 200	🗆 Add
		MIAMI, FL 33126	□Remove
			□Remove
			Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

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	<u>-</u>					
ffective dat	e, if other tha	n the date of filin	g:		(option	al) ing.) Pursuant to 605.020
Note: If the c	late inserted in	this block does not the Department of !	meet the applica	ble statutory filing	requirements, this d	ate will not be listed a
record speci d is filed.	ties a delayed e	ffective date, but no	t an effective tir	ne. at 12:01 a.m. c	n the earlier of: (b)	The 90th day after the
Dated	1	August 18	2022			
Jaicu	177			<u> </u>		
		Lellhon D				

Typed or printed name of signee