

# L 220000261176

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

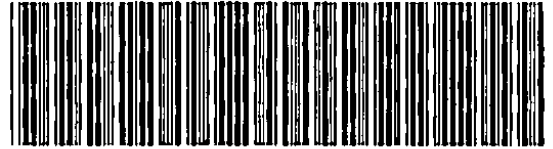
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700397352077

11/10/23--01011--007 \*+25.1

2023 11 10 PM 2:57  
CLERK OF STATE  
TALLAHASSEE, FL

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ZOKU MEDIA LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SEAN AMORGINOS

\_\_\_\_\_  
Name of Person

ZOKU MEDIA, LLC

\_\_\_\_\_  
Firm/Company

521 EAST STATE ROAD 434

\_\_\_\_\_  
Address

LONGWOOD, FL 32750

\_\_\_\_\_  
City/State and Zip Code

sean@kapa-law.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SEAN AMORGINOS

407

463-6900

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for 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 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**

**FILED**

**2022 NOV 10 PM**

ZOKU MEDIA LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**SECRETARY OF S  
TATE FLORIDA**

The Articles of Organization for this Limited Liability Company were filed on JUNE 7, 2022 and assigned  
Florida document number L22000261176.

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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

521 EAST STATE ROAD 434

**(Principal office address MUST BE A STREET ADDRESS)**

LONGWOOD, FL 32750

**Enter new mailing address, if applicable:**

521 EAST STATE ROAD 434

**(Mailing address MAY BE A POST OFFICE BOX)**

LONGWOOD, FL 32750

**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:**

**Name of New Registered Agent:**

SEAN AMORGINOS

**New Registered Office Address:**

521 EAST SR 434

Enter Florida street address

LONGWOOD

City

Florida 32750

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 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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Act</u>
MGR	NULLIAH ACQUISTION LTD	521 EAST STATE ROAD 434	<input checked="" type="checkbox"/> Add
		LONGWOOD, FL 32750	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MONNARO POT	521 EAST STATE ROAD 434	<input checked="" type="checkbox"/> Add
		LONGWOOD, FL 32750	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ORION GLOBAL ENTERPRISES	6260 C DUPONT STATION COURT EAST	<input type="checkbox"/> Add
		SUITE C	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FL 32217	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 MAY 10 11:17  
CLERK OF STATE  
TALLAHASSEE, FL

2022 NOV 10 PM 2:57  
CLERK OF STATE  
TALLAHASSEE, FL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (:

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated OCTOBER 13 2022

Signature of a member or authorized representative of a member

SEAN AMORGINOS

Typed or printed name of signer

**Filing Fee: \$25.00**