LZ2000270875

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone #	¥)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2023 MAY 22 AM 11: 42:

ORDER LE COSTO TION

COVER LEȚTER

TO: Registration Section Division of Corporations	•
Zepha LLC SUBJECT:	
	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Danny Augustin	
Name of Person	
Zepha LLC	
Firm/Company	_
2234 North Federal Highway #1724	
Address	 -
Boca Raton, FL 33431	
City/State and Zip Code	
AugoDinvestments@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
Danny Augustin	808 379-9630 at ()
Name of Person	Area Code & Daytime Telephone Number
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
Enclosed is a check for the following am	ount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. (a)		((b)		
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	. ,	nited liability company: OST OFFICE BOX)	
	2234 North Federal Highway #1724 Boca Raton, FL 33431		2234 Nortl	h Federal Highway	#1724 Boca Raton, FL
	United States	-	33431 Uni	ted States	
	06/14/2022		L220002708	375	
	Date of filing/registration in Florida	4.		Document number	 er
. (a)					
. (a)	Registered Agent and Registered Office shown on the records of the ZENBUSINESS INC.	e Florio	ia Dept. of Stat	_ e:	
	Registered Office Address (MUST BE FLORIDA STREET AL 336 E. COLLEGE AVE SUITE 301	<u>DDRES</u>	<u>(S)</u>	_	
	TALLAHASSEE, FL 3	2301		_	SPLIKET V.C 2023 MAY
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u> DANNY AUGUSTIN			-	FILED KETARY OF STATE KET CORPOLATIO MAY 22 AM II: 42
	NEW Registered Office Address:		-	_	
	2234 North Federal Highway #1724			-	1E 110 v:
	Boca Raton FL ³	3431		_	
hange gent v /as/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	gister ility c the lin mited	red office and ompany, it is nited liability	d the business offi s hereby confirmed y company or as o	ce of the registered d that the change(s)
Signa	ture of a member or authorized representative of a member			Printed or typed name	ic of signee
herei rovisi he obl	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided j ely reflect a change in the registered office address, I he	to ac erforn or in reby c	t in this capa nance of my o Chapter 605 confirm that i	acity. I further agi duties, and I am fa , F.S. Or, if this d the limited liability	ree to comply with the miliar with and accep ocument is being filed y company has been

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00