L22000317896

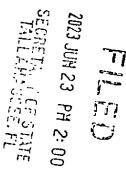
(F	Requestor's Name)
	Address)
(<i>f</i>	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(0	Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer.

Office Use Only



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Y. SCOTT AUG - 5 2023 Alina Klein 13862 Stone Mill Way Tampa, FL 33613 alinakleinlcsw@gmail.com (941) 323-1983 Jun 20, 2023

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

Re: Amendment of LLC Name from Blue Zebra LLC to Alina Klein Therapy, LLC

To Whom it May Concern,

I am writing to formally request the amendment of the name of my limited liability company (LLC) from its current name, Blue Zebra LLC, to the new proposed name, Alina Klein Therapy, LLC. I am the owner and managing member of the LLC. My contact info is listed above if there are any questions or concerns regarding this change.

Thank you, Alina Klein

COVER LETTER

TO: Registration : Division of C					
Blue Zeb	ra LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Alina Klein				
		Name of Person			
	Blue Zebra LLC				
		Firm/Company	··	: 2	
	13862 Stone Mill Way			2023 JUN	ار نمانده
		Address	70.	\sim	Language Comments
	Tampa, FL 33613			ω 2	
	alinakleinlesw@gmail.com		TATES TATES	PM 2: 00	-
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report noticall:	fication)		
Alina Klein		941 323-1983			
Name	of Person	at () Area Code Daytim	e 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 Certificate of Certified Control (additional coperation)	of Status py	
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Zebra LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) hability Company)	· · ·
The Articles of Organization for this Limited Liability Company	were filed on 07/18/2022	and assigned
Florida document number L22000317896		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
Alina Klein Therapy, LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		2028 SEC.
Principal office address MUST BE A STREET ADDRESS)		
		· Ν
	รัก กา เกา	CF PR
Inter new mailing address, if applicable:		\$
Mailing address MAY BE A POST OFFICE BOX)		0
		<u></u>
3. If amending the registered agent and/or registered office a	address on our records, enter the	name of the new regist
gent and/or the new registered office address here:	,	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	da at
	City	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
		<u> </u>	□Change
			□ Add
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	st be specific and cannot be prior to date of fili	(optional) ng or more than 90 days after filing.) Pursuant to 605,020
<u>le:</u> If the date inserted in this blument's effective date on the D		ry filing requirements, this date will not be listed a
cord specifies a delayed effective filed.	re date, but not an effective time, at 12:0	La.m. on the earlier of: (b) The 90th day after the
s filed.		
June 19th	2023	
Aluna V	Signature of a member or authorized represe	
1 8 4 8 2 100		