## L22000319111

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

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SUBJEC'	1:		nited Liability Company	<del>.</del>	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	urn all correspo	ndence concerning this matter	to the following:		
		Natan Gelber			
			Name of Person		
		Deal Maker LLC			
			Firm/Company	<del></del>	
		10231 Riva Ridge trail			
			Address		
		Orlando, Florida 32817			
			City/State and Zip Code		
		nzg.cap@gmail.com			
			to be used for future annual report no	otification)	
For furthe	r information c	oncerning this matter, please c	all:		
Natan Ge	lber		407 3463965 at ( )		
	Name o	f Person		me Telephone Number	
Enclosed	is a check for th	ne following amount:			
<b>■</b> \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres		Street Address:	laatia.	
	Registration S Division of C		Registration S Division of Co		
	P.O. Box 632		The Centre of	· ·	
٦	Γallahassee, I	FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Deal Maker 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 July 18th 2022 and assigned Florida document number <u>L22000319111</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NZG Capital LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 10231 Riva Ridge trl, Orlando, FL. 32817 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 10231 Riva Ridge trl, Orlando, FL. 32817 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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.

New Registered Agent's Signature, if changing 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
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			□ Remove
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signature of a member of authorized representative of a member	ated August 30th		·			
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