## L22000407306

(Reque	stor's Name)	
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PICK-UP	] WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Filin	g Officer:	





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SUBJECT: Corpo	oracion Z&P	20 LLC	
•	Name of Limi	ited Liability Company	
		,	
The enclosed Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	ence concerning this matter t	to the following:	
	Josus	Zapata	
		Name of Person	-
	<del></del>	Firm/Company	-
	74.66		
	3606 NW	15 Ave Apt 906 Address	-
	Miam', FL	33127  City/State and Zip Code  @gmail.com to be used for future annual report notification)	_
	,	City/State and Zip Code	
_	(orpozp20	@gmail.com	
			2022 3EC
For further information conc	erning this matter, please ca	all:	
Jose Z	apata	at (786) 685 1261	2022 KOV 14 // // // // // // // // // // // // //
Name of Pe	rson	Area Code Daytime Telephone Number	44
			्रं : ज़
Enclosed is a check for the fo	ollowing amount:		29
\$25.00 Filing Fee	□ \$30,00 Filing Fee &	☐ \$55.00 Filing Fee & ☐ \$60.00 Fi	ling Fee,
	Certificate of Status	(additional copy is enclosed) Certified	te of Status & Copy copy is enclosed)
Mailing Address: Registration Sec	tion	Street Address: Registration Section	
Division of Corp		Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

TO:

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Congration 7 &P	20 LLC	
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on o d Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Companies Florida document number <u>L22000 404306</u> .	ny were filed on09\right	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designar	
Enter new principal offices address, if applicable:		2022 3 EC
(Principal office address MUST BE A STREET ADDRESS)		
	•	
Enter new mailing address, if applicable:	·	A second
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	2
		1:1
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
Con Tradition of the Line of the Control of the Con	Enter Florida str	eet address
		. Florida
	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.

<u>Title</u>	<u>Name</u>	Address Type of Action
MGR	Josue Zuputa	3606 NW 5th A.e. Apt 906 XIAdd
		Miami FL 33124 Remove
		□Change
MGR	Josse M Zapata	3606 NW 5th Are. Apt 906 □Add
		Miam' FL 33127 Remove
		□Change
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