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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC
Account Number : 120220000070
Phone : (888)462-3453
Fax Number : (877)919+2613

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: EFILE1234@INCFILE.COM

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## COVER LETTER (((H23000045996 3)))

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TO: Registration S Division of Co			) g.
SUB III CT		ZUMI LLC	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lovette Dobson		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	<del></del>	Firm/Company	
	17350 State Hwy 249, #22	20	
		Address	
	Houston, TX 77064		
	EFILE1234@INCFILE.CO	City/State and Zip Code	
		to be used for future annual report no	olification)
For further information c	concerning this matter, please c	all;	
Lovette Dobson		1 888-462-34	
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address:	
Registration Section Division of Corporations		Registration S Division of Co	
P.O. Box 6327		The Centre of	•
Tallahassee, FL 32314		2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

(((H23000045996 3)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H23000045996 3)))

SITZU	MULLC	
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000508732</u>	were filed on 12/02/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Lumited Liabi	lity Company," the designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:	1150 NW 72nd Ave Tower 1 ste 455 #92	17
(Principal office address MUST BE A STREET ADDRESS)	Miami, Fl. 33126	<del></del>
		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name	of the new registere
		202
Name of New Registered Agent:		· 磁 - 五 : m 3
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florida	
Now the interest Ament's Viennature of shanning the interest to see to	City	- Zip Code =
New Registered Agent's Signature, if changing Registered Agent:		· <u>ω</u>
I hereby accept the appointment as registered agent and agraprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am fa provided for in Chapter 605, F.S. Or, i	uniliar with and f this document is

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 addeduced removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jonathan Vilarino	1150 Nw 72nd Ave Tower I Ste 455 #9217	□Add
		Miami, FL 33126	□Remove
			■Change
			🖸 Add
			□Remove
			□Change
	<del></del>		🗆 Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
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			□Remove
			Change
			□Add
			□Remove
			□ Change

D. If amending any other informati	ion, enter change(s) here: (Attach additional sheets, if necessary.)	
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18-19-19-1.		<del></del>
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E. Effective date, if other than the d (II in effective date is listed, the date mist t Note: If the date inserted in this bloc document's effective date on the Dep	ate of filing:	605.0207 (3)(b listed as the
If the record specifies a delayed effective or record is filed.	date, but not an effective time, at $12.0\mathrm{Fa}$ m, on the earlier of: (b) . The 90th day $\epsilon$	after the
Dated February 03	. 2023	
· · · · · · · · · · · · · · · · · · ·	Krellin Vilaria	-
	guature of a member of authorized representative of a member	
	Jonathan Vilarino  Lyped or printed name of Signee	-

Filing Fee: \$25.00