

L23 00002877

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000204320 3)))



H240002043203ABCR

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC  
Account Number : I20200000050  
Phone : (727)298-8007  
Fax Number : (305)397-0980

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

Email Address: filings@usacorporationservices.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ZNG LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

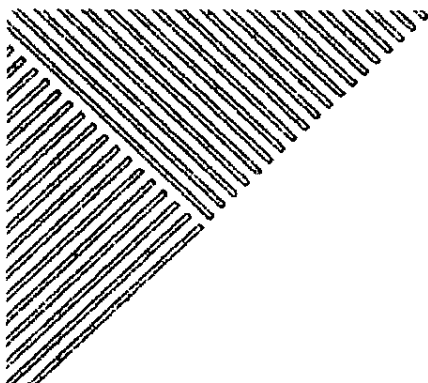
RECEIVED  
2024 JUN 13 PM 2:37

FILED  
2024 JUN 13 AM 8:50

Electronic Filing Menu

Corporate Filing Menu

Help



Luciana Mordini  
100 Se 2nd St, Suite 2000  
Miami, FL 33131

June 13, 2024

To Florida Department of State

We are resending these documents, first send on  
June 11, 2024 because we still haven't received an  
approval.

**Please send it as soon as posible.**

Additional fax number: (305) 397 - 0980

**FILED**  
2024 JUN 13 AM 8:50  
FBI

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ZNG 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 01/04/2023 and assigned  
Florida document number L23000002877.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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* Florida *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>	<u>Type of Action</u>
MGRM	ZARCO, PABLO	19 AV, 16-03 ZONA 10, GUATEMALA	<input type="checkbox"/> Add
		GUATEMALA, CP: 01010 GT	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	TELLERIA DENISE	10120 SW 127TH AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA, 33186-2419	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
2024 JUN 13 AM 8:50  
FBI

**Filing Fee: \$25.00**