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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration So Division of Cor	ent de de			
SUBJECT:	ZOZUANO	y Oshun	11C.	*
	Name of Lin	mited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspo	ondence concerning this matter	r to the following:		
	Maria Vi	Horia SiLuei Name of Person	/ Q	_
		Firm/Company		2027FEB 13
	1947 Exc	Albur D Address		B 13
		City/State and Zip Code		£ 8:
	SiLueira - E-mail address:	City/State and Zip Code Vicky83@ YAU (to be used for future annual report no	oo . 17	8: 53 - 4:5
For further information c	oncerning this matter, please o			
MARIA V. Name of	Silveira	at (<u>407</u>) <u>668</u> Area Code Daytii	2671 me Telephone Numb	oer
Enclosed is a check for the	ne following amount:			
\$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fee, cate of Status & ed Copy and copy is enclosed)
Mailing Addres Registration 9		Street Address: Registration S	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	oe Street, Suite	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	<u>r records.</u>)		
1			
he Articles of Organization for this Limited Liability Company were filed on	27/2023	and ass	igned
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liability company here:			
ne new name must be distinguishable and contain the words "Limited Liability Company," the designation	on "LLC" or the abbrevi	ation "L.	L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)		7023 -	
	<u></u>	- EB	<u>;</u>
		$\frac{3}{3}$	1
nter new mailing address, if applicable:			111
Mailing address MAY BE A POST OFFICE BOX ₁	, ai	— <u>—</u>	-
Tuning Business Mill Distriction of Floor Conference	1.1 A	رن <u>نن</u>	
	• #		
. If amending the registered agent and/or registered office address on our records, gent and/or the new registered office address here:	, enter the name of	<u>the nev</u>	v register
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida stree	et address		
	Flo ri da		
City	\overline{z}	ip Code	

company has been notified in writing of this change.

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

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>	Address	Type of Action
MGR	Maria Victoria Silveir	9 195 Riverside or armond 1	Beach Wadd
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an effective date ote: 11 the dat	, if other than the ce is listed, the date must te inserted in this blocective date on the Dep	be specific and or ok does not me	cannot be prior eet the applic	to date of filing able statutory	or more than 90 c		ling.) Purs		
record specific is filed.	es a delayed effective	date, but not a	m effective ti	ime, at 12:01 a	a.m. on the earli	er of: (b)	The 90t	h day a	fter the
ated	Februar	7 9.	202	<u>3</u> .					
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