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2023, "121 Fit 6:27

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COVER LETTER

TO: Registration Section Division of Corporation			
suвјест: <u>Zeta</u>	Worldwide Name of Limit	LLC red Liability Company	
The enclosed Articles of Art	nendment and fee(s) are subn	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	Joh	a Taddeo Name of Person	
	Posado	Taddeo Firm/Company	Dietiker
	24 SE	20rvl St	
-	Fort La	City/State and Zip Code N. taddeo Co be used for future annual report	ptd.law
For further information conc	cerning this matter, please ca	II:	
JOHN TO Name of Po	addeo erson	at (<u>561</u>) <u>702</u> Area Code Da	2-6478 aytime Telephone Number
Enclosed is a check for the f	ollowing amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Zeta Worldude LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L2300052145</u> .	on $\frac{1}{27}$ $\frac{2023}{2023}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	any here:
The new name must be distinguishable and contain the words "Limited Liability Company	-
Enter new principal offices address, if applicable:	2
(Principal office address MUST BE A STREET ADDRESS)	70
	<u> </u>
	27
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 agent and/or the new registered office address here:	our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	ter Florida street address
-	
City	, Florida Zip Code
Naw Pagistared Agent's Signature if changing Degistared Agent:	·

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>	Name	Address	Type of Action
Mbr	Thomas Michael Hendax	2598 East Sunse Blud Sute 2104 Fort Lauderdale FL 33304	□Remove
Mar	Morael Heranx	2598 East Suns Blue Sute 2104 Fort Landerdale FZ 33304	☐Remove
Mbr	<u>Yakov 21049</u>	2598 East Syrvise Blu Sute 2104 Fort Lauderdeile FZ 33304	☐Add? ☐Remove ☐ OChange (addice
Mar	Yakou Zvoya	2598 East Sinnse Blue Sute 2104 Tout Laudendale FL 33304	- CAdd
			□Add □Remove
			□Change
			□Add
			□Remove
			Change

if amending any other information, enter	r change(s) here: (Attach additional sheets, if necessary.)
	
	
	
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	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0205 ot meet the applicable statutory filing requirements, this date will not be listed as
e record specifies a delayed effective date, but rd is filed.	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated JME 16,	<u> 1823</u>
Storatura	of a member or authorized representative of a member
- inguatury)	
	JOHN Taddeo Typed or printed name of signee

Filing Fee: \$25.00