

L230000131855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

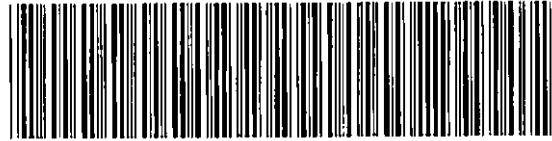
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/13/23--01001--001 **25.00

DATE RECEIVED

2023 APR 12 PM 2:36

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DATE RECEIVED
2023 APR 12 AM 9:15
STATE OF FLORIDA
TALLAHASSEE, FL

FILED

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED AMENDMENT FOR:

ZFB GROUP LLC

PLEASE RETURN A STAMPED COPY

CHECK# 9579 FOR: \$25.00

COVER LETTER

**TO: Registration Section
Division of Corporations
ZFB GROUP LLC**

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS A ESPINOSA

Name of Person

Firm/Company

175 SW 7TH STREET SUITE 1817

Address

MIAMI, FLORIDA, 33130

City/State and Zip Code

ceo@espigaholdings.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS A ESPINOSA

786

5314727

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:
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**

FILED

2023 APR 12 AM 9:15

ZFB GROUP LLC

(Name of the Limited Liability Company as it now appears on our records): STATE OF FLORIDA
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MARCH 14/2023 and assigned
Florida document number L23000131855.

This amendment is submitted to amend the following:

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

N.A.

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:

N.A.

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N.A.

(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:

N.A.

New Registered Office Address:

N.A.

Enter Florida street 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.

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N.A.

FILED
JUN 12 AM 9:15
CLERK OF STATE
TALLAHASSEE FL
1023

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

APRIL 6 2023
Dated _____

Signature of a member or authorized representative of a member

JUAN PABLO RIVERA CABAL

Typed or printed name of signee

Filing Fee: \$25.00