

L23000335540

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To:  
Division of Corporations  
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From:  
Account Name : LUPA ENTERPRISES INC  
Account Number : I20200000050  
Phone : (727)298-8007  
Fax Number : (305)397-0980

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ZB PROPERTY GROUP LLC

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SEP 20 2023

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZB PROPERTY GROUP 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 07/14/2023 and assigned Florida document number L23000335540.

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>                      |
|--------------|-------------------------------------|--|--|
| <u>MGRM</u>  | <u>ZIDROS, KONSTANDINOS</u>         | <u>2201 FIFTH LINE W</u><br><u>MISSISSAUGA ONTARIO L5K1V6 CA</u>                 | <input type="checkbox"/> Add               |
|              |                                     |  | <input checked="" type="checkbox"/> Remove |
|              |                                     |  | <input type="checkbox"/> Change            |
| <u>MGRM</u>  | <u>BOTTONI, DARRYL</u>              | <u>#507-1441 ELGIN ST</u><br><u>BURLINGTON ONTARIO L7S1E6 CA</u>                 | <input type="checkbox"/> Add               |
|              |                                     |  | <input checked="" type="checkbox"/> Remove |
|              |                                     |  | <input type="checkbox"/> Change            |
| <u>MGRM</u>  | <u>Yamas Group LLC</u>              | <u>1900 N BAYSHORE DR STE 1A #136-1460</u><br><u>MIAMI, FL 33132</u>             | <input checked="" type="checkbox"/> Add    |
|              |                                     |  | <input type="checkbox"/> Remove            |
|              |                                     |  | <input type="checkbox"/> Change            |
| <u>MGR</u>   | <u>Bottoni Management Group LLC</u> | <u>1900 N BAYSHORE DR</u><br><u>SUITE 1A #136-1461</u><br><u>MIAMI, FL 33132</u> | <input checked="" 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            |

**Filing Fee: \$25.00**