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.

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Division of Corporations

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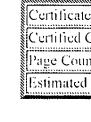
From:

Account Name : TAX LINKS CONSULTANTS LLC

Account Number : I20220000146 Phone : (407)270-4846 Fax Number : (407)270-4846

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CORZAY ENTERPRISE LLC



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COVER LETTER

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CORZAY ENTERPRISE LLC					
	Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·		
Articles of	Amendment and fee(s) are sub	omitted for filing			
all correspo	ondence concerning this matter	to the following.			
	FRANCISCO O ZAYAS				
	 -	Name of Ferson			
		M.			
		Firm/Company	 _		
	316 LAKE MARIANA PI				
		Address			
	AUBURNDALE, FL 338;	23			
		City State and Zip Code			
	fzayas98@yahoo.c	com			
	E-mail address (to be used for future annual report not	afication)		
iformation co	oncerning this matter, please co	all			
0 O. ZAYA:	S	787 223-6760			
Name of	Person	Aren Code Duytin	ne Telephone Number		
check for th	ic following amount.				
iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
		Street Address:			
Registration Section			Registration Section		
			Division of Corporations The Centre of Tallahassee		
		2415 N. Monroe Street, Suite 810			
	formation of Corner of Cor	Articles of Amendment and fee(s) are subtailed correspondence concerning this matter. FRANCISCO O ZAYAS AUBURNDALE, FL 338. fzayas98@yahoo.o E-mail address (formation concerning this matter, please of O.O. ZAYAS Name of Person check for the following amount. thing Fee	Son of Corporations		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

(((H23000289958 3)))

CORZAY ENTERPRISE 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 07/25/2023 __ and assigned Florida document number 1,23000351635 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 "LLC" 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

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.

Citv

, Florida

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	VANESSA CORDERO ALMODO	316 LAKE MARIANA PL	
		AUBURNDALE, FL 33823	
			□Change
			□Add
			_Remove
			TChange
			□ Add
			ERemove
			CChange
			ZAdd
		 	□Remove
			□Change
			Z Add
			□Remove
			(□Change
			□Remove
			Change

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D. If amending any other info	ormation, enter change((s) here: (Attach	i additional sheets, j	inecessary.)	
		 -			
					
					
					
	 				
				<u></u>	
E. Effective date, if other than (If an effective date is listed, the dat Note: If the date inserted in the document's effective date on the content of the	n the date of filing: to must be specific and cannot his block does not meet the	r applicable statute	ung or more than 90 day	optional) cafter filing) Pursuant to 605 (s, this date will not be liste	0207 (3)(b) d as the
If the record specifies a delayed eff record is filed.	ective date, but not an effe	ective time, at 12).	of a moon the earlier	of (b). The 90th day after	the
Dated August 21	202.	; 			
	Signature of a member	#15			
		or authorized repres			

Filing Fee: \$25.00

Typed or printed name of signee