123000543665

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
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(Business Entity Name)			
(Document Number)			
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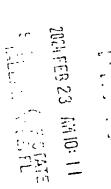
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COVER LETTER

TO: Registration Se Division of Cor				
AND THE COMPANY	ZERIA LLC			
30000.CT	Name of Lin			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	ELVIS MARA			
	4 <u></u>	Name of Person	<u>- </u>	
		Firm-Company		
	8222 EAGLES PARK DR			
	ST PETERSBUR, FL 33709			
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notif all:	ication)	
ELVIS MARA		813 410-1795 at ()		
Name o	f Person	Area Code Daytime	e Telephone Number 9 2	
Enclosed is a check for th	ne following amount:		23	
□ \$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (Copy additional copy is coolsed)	

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

E & A PIZZERIA LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Honda Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/07/2024 and assigned Florida document number 1.23000543665

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)

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:	lie 5
New Registered Office Address:	
	Enter Florida street address
	. Florida

City

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 companions been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	ARMAND CEKANI	3674 AMELIA WAY, PALM HARBOR, FL 34684	□Add
			■ Remove
			□Change
			⊡Add
			□Remove
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			□Change
	···		□Add
			⊡Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ___ (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, cor. The 90th day after the record is fixed. Dated February 7 Signature of a member or authorized representative of a member ELVIS MARA Typed or printed name of signee

Filing Fee: \$25.00