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(Requestor's Name)
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(Document Number)
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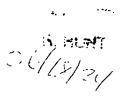
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06/18/24--01027--022 **₩**25.00

18 11 Tills



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Zenith Real Estate Partners LLC 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:
Zakhar khylyuk Name of Person
Zehith Real Estate Partners LLC
4009 4th St SW Address
Lehigh Acres Fl 33976 City/State and Zip Code
Realestate nel P10 amail com E-mail address: (to be used for future amusal report notification)
For further information concerning this matter, please call:
Zakhar Khylyuk at (253) 886-2215 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$30.00 Filing Fee

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

Zenith Real Est. (Name of the Limited Liability Comparing A Florida Limited L	He Partners ny as it now appears on our records nability Company)	LLC
The Articles of Organization for this Limited Liability Company Florida document number <u>Ref. number</u> L2400	were filed on <u>06/13/)</u> 20060207	μ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.I.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)	10676 Coloni Ste 30 #53 Fort Myers, F	al Blvd 5 1 33913
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>enter (</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida strect address	· · · · · · · · · · · · · · · · · · ·
	. Flo	orida
	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

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
AMBR	Zakhar Khylyuk	10676 Colonial Blrd	22 Add
	0 0	Ste 30 #535	□Remove
		Ste 30 #535 Fort Myers, F1 33913	
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
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ective date if	other than the date	e of filing:			(optional)	
n effective date is	other than the date listed, the date must be s nserted in this block of	pecific and cannot be	prior to date of filing	or more than 90 day	s after filing.) Pursuan	t to 605.020° be listed as
cument's effecti	ve date on the Depart	ment of State's rec	ords.	ming requirement	s, instate with not	00 110100 41
	delayed effective dat	e, but not an effecti	ive time, at 12:01	a.m. on the earlier	of: (b) The 90th d	ay after the
is filed.						
ted <u>06 13</u>	3/200	. 202	24.			
1	·					
•	/ 1/19	<i></i>				
<u> </u>	Sign	nature of a member or	authorized represen	tative of a member		

Filing Fee: \$25.00