## L25000152823

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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

	BY ZAN LLC			
SUBJECT:	Name of Lin	nited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Daniel Velez			
Name of Person				
	Sounds By Zan LLC			
	Firm/Company			
	1555 NE 176 St			
		Address		
	North Miami Beach, Flor	ida 33162		
		City/State and Zip Code		i ,
	soundsbyzan@gmail.com			
	E-mail address: (	to be used for future annual report noti	fication)	• • •
For further information of	concerning this matter, please c	all:		
Daniel Velez		786 6418119 at ()		
Name o	f Person		e Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is enc	
<u>Mailing Addres</u> Registration S		Street Address: Registration Sec	etion	
Division of C	orporations	Division of Cor	porations	
P.O. Box 632	:7	The Centre of T	allahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUNDS BY ZAN LLC		
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited I		3/31/2025 and assigned
Florida document number L25000152823		
This amendment is submitted to amend the fol	lowing:	
A. If amending name, <u>enter the new name o</u>	of the limited liability company h	<u>ere</u> :
he 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 appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		
Mailing address MAY BE A POST OFFICE		<del></del>
3. If amending the registered agent and/or	ragistared office address on our	records enter the name of the new regist
gent and/or the new registered office addre		records, enter the name of the new regist
Name of New Registered Agent:	Larissa Velez	
New Registered Office Address:	1555 NE 176 St	
	Enter Flo	rida street address
	North Miami Beach	, 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

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
MGR	Daniel Velez	1555 NE 176 ST NORTH MIAMI BEACH, FL 33162	□Add
			≣Remove
			□Change
AR	Larissa Velez	1555 NE 176 ST NORTH MIAMI BEACH, FL 33162	□Add
			PRemove
			DChange
MGR	Larissa Velez	1555 NE 176 ST NORTH MIAMI BEACH, FL 33162	🗏 Add
			□Remove
			□Change
AR	Sara Velez	1555 NE 176 ST NORTH MIAMI BEACH, FL 33162	<b>=</b> A <b>d</b> d
			□Remove
			□Change
			□Add
			□Remove
			□Change
		<del></del>	□Add
			□Remove
			□ Change

Daniel Velez is no longe	er a member or manager of the LLC.
Larissa Velez is now the	e sole member and manager of Sounds by Zan LLC.
The Registered Agent is hereby change	d to Larissa Velez , with the registered office address at 1555 NE 176 ST, North Mianu Beach, FL 33162
Sara Velez is added as a	an Authorized Representative (AR) of the LLC.
	<del></del>
	<del> </del>
lote: If the date inserted in th	the date of filing:
record specifies a delayed eff l is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the

Filing Fee: \$25.00

--- Signature of a member or authorized representative of a member

Typed or printed name of signee

Daniel Velez