

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

M22000014137

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.

(((H22000348471 3)))



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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : CAPITOL SERVICES, INC.
 Account Number : I20160000017
 Phone : (855)498-5500
 Fax Number : (800)432-3622

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 Z THE ONE 1445 FL, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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OCT 13 2022
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COVER LETTER

H22000348471

TO: Registration Section
Division of Corporations

SUBJECT: Z The One 1445 FL, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joe Hakuna

Name of Person

AZT Corporation

Firm/Company

16600 Dallas Parkway, Suite 300

Address

Dallas, Texas, 75248

City/State and Zip Code

jhakuna@aztcorporation.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joe Hakuna

972

428 2948

at ()

Name of Person

Area Code

Daytime Telephone Number

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

Enclosed is a check for the following amount:

- \$75 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

H22000348471

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Z The One 1445 FL, LLC

SECOND: The Florida Document number of the limited liability company is: M22000014137

THIRD: Document to be corrected is: Application by Foreign LLC for Authorization to Transact Business in FL

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Incorrect Statement: Section 8 lists incorrect Member/Managers/Officers. The corrected statement follows below:

Sole Manager: Zeshan Tabani; Sole Member: Zeshan Tabani. Vice Presidents: Zaffar Tabani, Zeshan Tabani and

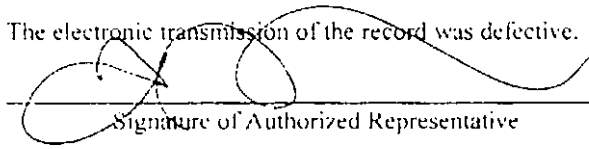
Aliya Tabani; Auth. Person: Arash Mostafavipour; Address: 16600 Dallas Pkwy, Ste. 300, Dallas, TX 75248

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

The electronic transmission of the record was defective.



Signature of Authorized Representative

10/11/22

Date

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Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)