P12 000009879

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
JUN 1 3 2022

Office Use Only



000386257450

04/22/22--01009--019 **25.00

2022 APR 22 PM 12: 31

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations ZAMORA CONCRETE AND GENERAL LABOR CORP SUBJECT: 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: Name of Person The Munizzi Law Firm Firm/Company 1120 N. Ronald Reagan Blvd. Address Longwood, FL 32750 City/State and Zip Code Legal@munizzilaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Justin S. Munizzi Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZAMORA CONCRETE AND GENERAL LABOR CORP

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

	(,,		- S : S = -
The Articles of Organization for this Limited I	iability Company were filed	d on 01/30/2012	ين جنين and assi∰ed
Florida document number P12000009879	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability comp	pany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compan	ny," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office address	-	n our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	1120 N. Ronald Reagan B		
New Registered Office Address:	Blvd. Inter Florida street address		
	_		22050
	Longwood City	, Florid	Ja 32750 Zip Code
	City		гір Соае

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
			□Add
			□Remove
			□Change
			Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			Remove
			□Change
			□ Add
			Remove
			□ Change

=	
-	
-	
_	
_	
_	
_	
-	
_	
_	
-	
_	
_	
-	
-	
an effe Note:	ve date, if other than the date of filing:
record is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated_	Apr 11, 2022
	ubaldo Zamora ubaldo zamora (Apr 11, 2022 22:36 ED1)
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00