To:



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(((H25000063912 3)))



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To:

Division of Corporations

Fax Number ; (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

**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 SENORA UNITY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

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To:

2025-02-20 10:37:43 UTC+14 18: AKTICLES OF AMENDMENT

18506176383

From: ZenBusiness User

H250000639123

TO

ARTICLES OF ORGANIZATION OF

SENORA UNITY LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	i <mark>ny as it now appears on our recor</mark> t Liability Company)	<u>(15.</u>)
the Articles of Organization for this Limited Liability Company	and assigned	
lorida document number 1.25000060264		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:	17940 nw sunshine state pkwy	<i>'</i> W
Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33169	
		2025
nter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		9 1
		
If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	os s
	:	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

To:

From: ZenBusiness User

Page: 3 of 4 2025-02-20 10:37:43 UTC÷14 18506176383 in amending Authorized rerson(s) authorized to manage, enter the thie, name, and address of each person or removed from our records:

MGR = Manager AMBR = Authorized Member H250000639123

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Janiyah Senora	17940 nw sunshine state pkwy w	≡ Add
		Miami, FL 33169	□Remove
		<u></u>	🗆 Change
			☐ Remove
			□Change
			□Add
			□Remove
			LlChange
····			
			□Remove
			□Change
			UAdd
			(TRemove
			□ Add
			□Remove
			EChange

To:

innovation, and custon	ner satisfaction, we deliver professional services tailored to diverse needs,
helping bring ideas to	life with reliability, expertise, and dedication.
	······································

E. Effective date, if other tha	n the date of filing:
Note: If the date inserted in	this block does not meet the applicable statutory filing requirements, this date will not be listed as the the Department of State's records.
f the record specifies a delayed elected is filed.	ffective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
Dated February 19	2025

H25000063912 3

Filing Fee: \$25.00

Typed or printed name of signee