16000219353

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

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SURJEC	¬т•	MEKANIK					
CODUC	- 1 •	Name of Limited Liability Company					
			Amendment and fee(s) are subr	· ·			
Please re	turn	all correspo	ndence concerning this matter t	o the following:			
			ROBERT ZARA, ESQ.				
				Name of Person			
SUBJECT The enclosed For further ROBERT			ZARA LAW OFFICES				
	Firm/Company						
111 JOHN STREET, SUITE 1810							
				Address			
			NEW YORK, NY 10038			17	Print.
			-	City/State and Zip Code			A PER
			zara@zaralawny.com		17	13	- 85g
Eos forth	:	6		be used for future annual report not	ification)	P	E Par
			oncerning this matter, please cal	II:		ઝ ૩૨	<۲. مناب
ROBER'	T ZA	ARA		212 619-4500 at ()		29	الله الله الله
		Name of	Person	Area Code Daytim	ne Telephone Number		
Enclosed	is a	check for th	e following amount:				
Certificate of Status Certified Copy (additional copy is enclosed)			□ \$60.00 Filing Certificate of Certified Cop (additional copy	Status &			
			NG ADDRESS:	STREET/COUR Registration Section			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

1.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MEKANIKA USA LLC				
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L16000219353	were filed on DECEMBER 5, 2016	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbrev	viation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	601 BRICKELL KEY DRIVE, SUITE 700			
**************************************	MIAMI, FL 33131	- F0		
Enter new mailing address, if applicable:	601 BRICKELL KEY DRIVE, SUITE 700	CRETA LAHA:		
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33131	- 32E		
B. If amending the registered agent and/or registered or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>enter the</u>	name of the ne		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, 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

uthorized Person(s) authorized to manage, enter the title, name, and address of each person being added a from our records:

Manager WBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
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			-Add SECRETARY
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ANGUN, THE PERSON ENT	ITLED TO MANAGE 1	THE LLC, IS A	MENDED AS FO	LLOWS:
REMOVE: 111 JOHN STREET	Γ, SUITE 1810, NEW Y	ORK, NY 1003	8, US.	
ADD: C/O MEKANIKA USA	LLC, 601 BRICKELL K	KEY DRIVE, S	JITE 700, MIAMI	, FL 33131
		-		
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ive date, if other than the da fective date is listed, the date must be If the date inserted in this block nent's effective date on the Depa	e specific and cannot be price does not meet the appli	cable statutory	or more than 90 days	optional) s after filing.) Pursuant to s, this date will not be l
icin s effective date of the Bepa	Tunem of State \$ feedig	3.		
cord specifies a delayed e 90th day after the record	ffective date, but n 1 is filed.	ot an effecti	ve time, at 12:	01 a.m. on the ea
JANUARY 11	2016	·		

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Page 3 of 3

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Typed or printed name of signee