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EXAMINER



COVER LETTER

TO: , Registratión Section
Division of Corporations

SUBJECT: NIKO \	/ENTURES, LLC			-	1
	(Name of Lim	nited Liability Company)		_	-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	CHRIS GERTZ				
		(Name of Person)			
	CHRISTOPHER J. GER				
•		(Firm/Company)			
	1100 SE 11TH COURT				
		(Address)			
	FORT LAUDERDALE, F	L 33316			
		(City/State and Zip Code)			
For further information of	concerning this matter, please c	all:			
CHRIS GERTZ		at (954) 565-2601		SECRETALIANA	
	of Person)	(Area Code & Daytime T	elephone Number)	FARE SE	MAZZY W
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Enclosed is a check for the	he following amount:			SECTION IN	1 TOTAL S
✓ \$25.00 Filing Fee Certificate of Status	-	□\$55.00 Filing Fee &	□\$ 60.00 Filing	4 mm 7 / N	Constant Page
		Certified Copy	Certificate c	of Status &	
		(additional copy is enclosed)	Certified Co	opy္က ံ ံ ပ copy is enclosed))

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NIKO VENTURES, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JUNE 13, 2005 and assigned Florida document number <u>L05000057908</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) Florida (Zip Code) (City)

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title <u>Name</u> **Address** Type of Action MGRM KARA K. GERTZ 1100 SE 11TH COURT ■ Add FORT LAUDERDALE, FL 33316 Remove _ Add Remove 🗂 Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ARTICLE V OF THE ARTICLES IS HEREBY AMENDED TO REFLECT THAT KARA K. GERTZ IS A MEMBER OF THE COMPANY BUT NOT A MANAGING MEMBER OF THE COMPANY. Dated AUGUST 22 2008 Signature of a member or authorized representative of a member

Page 2 of 2

CHRISTOPHER J. GERTZ, MGRM

Filing Fee: \$25.00

Typed or printed name of signee