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JUL 21 2008

EXAMINER



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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Nanaf T	rading, LLC		
SUBSECT.		ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Adriana P. Florez		
		(Name of Person)	
	Nanaf Trading, LLC		
		(Firm/Company)	
	1217 Abberton Drive		
		(Address)	
	Orlando, FL 32837		
		(City/State and Zip Code)	
For further information co	oncerning this matter, please ca	all:	
Albeiro Osorio		at (407) 873-5636	
(Name o	f Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

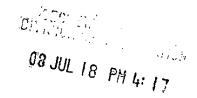
MAILING ADDRESS:

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



Nanaf Trading, LLC		<i>(</i>
	iability Company as it now appears on clorida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liab	oility Company were filed on October (05, 2007 and assigned
Florida document number L07000101888	·	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and end with to "L.L.C."	the words "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter F	lorida street address)
	(Sino) 1	, 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 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 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

	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
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			Add Remove
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<u>l</u> ar	n changing the nature of my business. T	he principal activity will be home-based website	
<u>l</u> ar	n changing the nature of my business. T	he principal activity will be home-based website	

Page 2 of 2

Filing Fee: \$25.00