

LD1000114379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

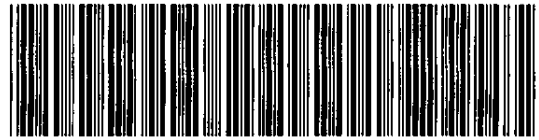
Special Instructions to Filing Officer:

L. SELLERS

DEC 16 2009

EXAMINER

Office Use Only



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11/23/09--01022--005 **25.00

FILED
09 DEC 15 AM 8:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TALIKA PARIS

November 16 , 2009

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

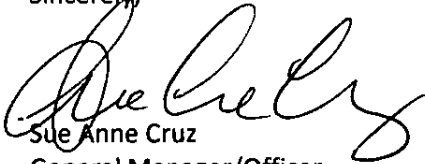
To whom it may concern:

This letter is to notify you that our corporate (Principle) offices have moved to a new address listed below:

Talika America, LLC
7480 SW 40th Street, Ste# 430
Miami, FL 33155

Please see attached cover letter and articles of amendment and check attached to make the necessary changes. Please contact me with any questions you may have at 786-388-7797 Mon-Fri 9am-5:30 pm.

Sincerely,



Sue Anne Cruz
General Manager/Officer
Talika America, LLC

Cc: File



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 24, 2009

SUE ANNE CRUZ
7480 SW 40TH STREET, #430
MIAMI, FL 33155

SUBJECT: TALIKA AMERICA, LLC
Ref. Number: L07000114379

We have received your document for TALIKA AMERICA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The second page to the amendment wasn't submitted. Enclosed is a blank page for you to complete and sign.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 009A00036474

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Talika America, LLC.
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:

Sue Anne Cruz
Name of Person

Talika America, LLC.
Firm/Company

7480 SW 40th Street, #430
Address

Miami, FL. 33155
City/State and Zip Code

sue@talika.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sue Anne Cruz at (786) 388-7117
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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

Talika America 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 02/28/08 and assigned Florida document number LO1000114379

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)

Talika America, LLC.
7480 SW 40th St., Ste #430
Miami, FL 33155

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

"same as above"

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:

7480 SW 40th Street, Ste #430
Enter Florida street address
Miami, Florida 33155
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 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	Name	Address	Type of Action
MGRM	Sue Anne Cruz	7480 SW 40th St., #430 Miami, FL 33155	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Just changing address per 1st sheet attached

Dated December 2, 2009

Sue Anne Cruz
Signature of a member or authorized representative of a member

Sue Anne Cruz
Typed or printed name of signee

FILED
 09 DEC 15 AM 8:10
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA