Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AVILA RODRIGUEZ HERNANDEZ MENA & FERRI LLP

Account Number : 120070000136 Phone : (305)779~3564 Fax Number : (305)779-3561

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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K. BALY EXAMINER MAR 1 7 2011

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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE	?CT:	NANI	NI USA, LLC			
			ited Liability Company	 		
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:						
	ANA M. SANZ Name of Person					
	AVILA RODRIGUEZ HERNANDEZ MENA & FERRI, LLP Firm/Company					
	2525 Ponce de Leon Blvd., Suite 1225 Address					
	Coral Gables FL 33134					
			City/State and Zip Code	11-		
	asanz@arhmf.com E-mail address: (to be used for future annual report notification)					
For fun	ther information co	oncerning this matter, please o	•	anony		
	Ar	a M. Sanz	at (786) 5	94-4102		
	Name of		at (786) 5	Telephone Number		
Enclose	ed is a check for th	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)		
	Registra Divisior P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 (see, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED 11 MAR 16 AM 7: 48 ALLAHASSEE, FLORIDA

NANNI USA, LLC					
(Name of the Limited Liability Company as it now appears on our rec (A Florida Limited Liability Company)	ords.)				
The Articles of Organization for this Limited Liability Company were filed on March 10	0, 2011 and assigned				
Florida document numberL11000029889					
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 desi "L.L.C."	gnation "LLC" or the abbreviation				
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 registered agent and/or the new registered office address here:	s, enter the name of the new				
Name of New Registered Agent:					
New Registered Office Address:					
Enter Florida s	Enter Florida street address				
, FI	lorida				
·	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

Page 1 of 2

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 = MGRM	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	-		Add Remove
<u> </u>			Add Remove
			Add Remove
D. If am		hange(s) here: (Attach additional sheets, if necessary.) ger - Name should be changed to read a Accai ⁿ	_ _
			
Dated	March 14	2011	
	Signature of a me	ember or authorized representative of a member	
		Marco Ferri	
	T	yped or printed name of signee	

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Filing Fee: \$25.00