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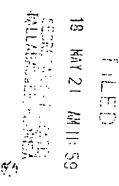
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## **COVER LETTER**

SUBJECT:	MOFON	BULDING LI	LC.
		ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	ONYEKA	CHUKWU EZIK	E-MKPARU
		Name of Person	
	MOFO	N Polled INC	LLC.
	w1-1	Firm/Company	
	16128 1	HUTCHISON R	D
		Address	
	TAMPA	City/State and Zip Code  Zari Q Halheri . State to be used for future annual report notific	
		City/State and Zip Code	
	<u>abu</u>	zari Wyenhow.	<u>Com</u>
	E-mail address: (	to be used for future annual report notific	ration)
For further information con	cerning this matter, please co	all:	
Dryekachul	cwu Ezike	at (727) 687 Area Code Daytime	8581
Name of r	erson	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
S25.00 Filing Fee	-	□ \$55.00 Pitting Page &	Disco on the in
525,000 Filling 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:

TO: Registration Section Division of Corporations

> 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

MOFON	BUILDING LLC.
( <u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number <u>L11000102</u>	ility Company were filed on 9712011 and assigned 326
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BO	2.32
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 offic	e address here:
Name of New Registered Agent:	25 (O
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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>Member</u>	Blessing Qilka	<u>All Ventura</u> Dr Oldsmar FL 34677	<b>,</b> ≱∕Add
		Oldsmar FL 34677	□ Remove
			Change
Member	Izuchukwu Ojika	411 Ventura Dr	<b>X</b> Add
		Oldsmar FL 34677	□ Remove
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fective date, if oth	er than the date of filing:		(optional)	
an effective date is liste ote: If the date inse	f, the date must be specific and cannot be ted in this block does not meet the up	plicable statutory filing req	an 90 days after filing	) Pursuant to 605,02
ocument's effective (	ate on the Department of State's reco	ords.		
e record specifie	a delayed effective date, but	not an effective time,	at 12:01 a.m.	on the earlier
	er the record is filed.			
nted Ma	y 18th 20	180		
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Page 3 of 3

Filing Fee: \$25.00