L130000/5955

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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05/30/13--01021--005 **25.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2013

SISAY N. TEGEGN NILE RIVER LLC 6715 POWERS AVE., STE. #3 JACKSONVILLE, FL 32217

13 HAY 20 PH 2: 10

SUBJECT: NILE RIVER LLC Ref. Number: L13000015955

Please note that NO PAYMENT was received with this filing, that NO PAYMENT has been retained, and that the documents are being returned UNFILED.

Please return your AMENDMENT with a check for at least \$25.00.

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) 245-6051.

Buck Kohr Regulatory Specialist II

Letter Number: 713A00010599

TO: Kegistration Secti Division of Corpo		are sa
SUBJECT: <u>Mîle</u>	River LC Name of Limited Liability Company	TALLANAY 20
	nendment and fee(s) are submitted for filing. ence concerning this matter to the following:	PH 2: 19
	Sisay N Tegegn Name of Person	Y
	Nile River UC Firm'Company	
	6715 POWERS AVE, Ste#3 Address	
	Acknowlille F/ 32217	

<u>delic stax060 yahoo-com</u> E-mail address: (to be used for future annual report notification)

City/State and Zip Code

For further information concerning this matter, please call:

Si Saf TESEM Name of Person

at (<u>904)386-S/S4</u> Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

CJ\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □S60.00 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

AF Nile R	RTICLES OF AMENDMENT TO RTICLES OF ORGANIZATION OF <i>IVEC LLC</i>	TALLAH 13 MAY 20 PH 22 P
	ited Liability Company as it now appears on our (A Florida Limited Liability Company)	
The Articles of Organization for this Limite	ed Liability Company were filed on $01/3$	0 2013 and assigned
Florida document number <u>L1300</u>	0015955	
This amendment is submitted to amend the	following:	
A. If amending name, <u>enter the new nan</u>	ne of the limited liability company here:	
he new name must be distinguishable and en L.L.C."	d with the words 'Limited Liability Company," the	designation "LLC" or the abbreviation
	n lieghlo:	
Enter new principal offices address, if ap <i>Principal office address MUST BE A STI</i>		
Frincipal Office autoress MUST DE A ST		······································
		· · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable		
Mailing address MAY BE A POST OFFI		
3. If amending the registered agent a registered agent and/or the new registered agent and/or the new registered	and/or registered office address on our reco ed office address here:	ords, <u>enter the name of the ne</u>
Name of New Registered Agent:		·····
New Registered Office Address:		
	Enter Flori	da 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 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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

, MGR = Manager MGRM = Managing Member

•

Title	Name	Address Type	of Action
MGR	<u>Sisay N. Tegegn</u>	7400 Powers Ave #260	Add
MGR	<u>Si'say N. Tegegn</u> Si'say N Tegeg	1400 Powers Ave #260	Remove
	· · · · · · · · · · · · · · · · · · ·		Add
			Remove
			Add
			Remove
	<u></u>		Add
			Remove
			Add
			Remove
		<u> </u>	
	·		Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ONP ΩM ea to MG nome \circ 1 Ц nisay 5 Correc eo 0(1 Ц 3 Dated ____ X 570-7 TC9C 3M Signature of a member or authorized representative of a member SISHY N. TEGEGN Typed or printed name of signee Page 3 of 3 Filing Fee: \$25.00 Money 6 roler Spil