L1500005813/

(Re	equestor's Name)	
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FILTO 15 JUN -5 PH 4: 03 SECRETARY OF STATE AFLAHASSEE, FLORIDA

T. HAMPTO

COVER LETTER -*

TO: Registration S Division of Co			•
SUBJECT:	Name of Lim	Lic Enterpris	es LLC
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ASK	win Abrah	nam
		Name of Person	
		Firm/Company	
	PU BOX	10324	
		Address	
	Miami	H 33131	
	OShwin a	City/State and Zip Code Code Code Code Code Code	H mail com
For further information	concerning this matter, please co	, o o o mora non manage report non	Callony
Name	of Person	at () 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

Nomadic E	aterdrises	LLC
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our fee Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 1500005813</u> .	were filed on	and assigned
This amendment is submitted to amend the following:		SECRE TALLAH
A. If amending name, enter the new name of the limited liab	ility company here:	ASSET
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	LLC" or the abbreviation "L.L.G."
Enter new principal offices address, if applicable:		ORIGINAL STATE
(Principal office address MUST BE A STREET ADDRESS)		>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX Miami	10324 FL 33131
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		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

1BR = A	anager uthorized Member		
<u>le</u>	<u>Name</u>	Address	Type of Action
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	May 2015 AShan Signature of	d.	ignee	15 JUN -5 SECRETARY