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Certified Copies	Certificates	s of Status
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: DY	Rame of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	0 y & Z 2001 M	214th street Address	LCC / M.ka broup One
	Vosa m_ben E-mail address: (ni Beach PL 3 City/State and Zip Code amram @ yahoo. Code to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
Yoram (2) Name of	Ben Amvem of Person	at (305) 527- Area Code Daytime	7802 e Telephone Number
Enclosed is a check for t	_		
\$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

	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on	and assigned
Florida document number <u>L15000066690</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	ability company here:	
The new name must be distinguishable and end with the words "Limited L	nability Company," the designation "LLC" or the	e abbreviation "L.L.C."
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 registered agent and/or the new registered office address h		er the name of the ne
Name of New Registered Agent:		35 8 T
New Registered Office Address:		S 3 (a
	Enter Florida street address , Florida	7:20
N. D. C. LA G. War et al. Walancia Designatural Assessing	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>ni:</u>	

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

	anager		
<u>Title</u>	Name /	Address	Type of Action
MGR	Mika Group By	2001 NE 214th St. North Mani Beach Fl 33	☐ Add
MGR	Mika Group One	LLC 2001 NE 214444	\ Add
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he date this document is filed by the Florida Dep	or to date of receipt or filed date and cannot be more partment of State)	
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	Page 3 of 3	15 APR
	Filing Fee: \$25.00	
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Reason for	change:	annels . To believe and

One LLC.