## L150001 36273

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SIII	NKTR LLC			
SUL	JEC1:	Name of Limit	ed Liability Company	
			,	
The	enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Plea	se return all correspon	ndence concerning this matter to	o the following:	
		ISAAC MANZO, ESQ.		
			Name of Person	
		MANZO & ASSOCIATES	, P.A.	
			Firm/Company	
		4767 NEW BROAD ST.		
			Address	
		ORLANDO, FL 32814		
			City/State and Zip Code	
		E-mail address: (to	be used for future annual report notifi	ication)
For	further information co	oncerning this matter, please cal	11:	·
Isaa	ac Manzo, Esq.		407 514-2692 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enc	losed 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)

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

NKTR LLC ,		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.)  d Liability Company)	
The Articles of Organization for this Limited Liability Compar	y were filed on 8/10/2015	and assigned
Florida document number L15000136273		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2625 Middlefield Rd Suite 561	Palo Alto, CA 94306
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	2625 Middlefield Rd Suite 561	Palo Alto, CA 94306
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		ter the name of the nev
	70 g	ń TO
Name of New Registered Agent:	#f	
New Registered Office Address:	শূৰ	
	Enter Florida street address	o U
·	OR , Flori <b>ës</b>	Zip Code
	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
MGR	MANZO AND ASSOCIATES PA	4767 NEW BROAD STREET	□ Add
,		ORLANDO, FL 32814	■ Remove
			Change
MGR	ROADHOUSE VENTURES LLC	2625 Middlefield Rd Suite 561	
		Palo Alto, CA 94306	☐ Remove
			Change
			Add
			Remove
			☐ Change
			Add
			Remove
			Change
			□ Add
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tive date, if other frective date is listed, to the date inserted ment's effective date to the date of	the date must be speci d in this block does e on the Departmer	fic and cannot be prion in the prion of the applicant of State's records	r to date of filing or r cable statutory filing.	ng requireme	nts, this da	ing.) Pursua ate will no	t be listed
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e 90th day afte							
e 90th day after		2016	·				
June		, 2016	<u> </u>				
June	Signature	2016 , e of a member or auth	orized representativ	e of a member	\$1 1 mm	103 204 173	A-TERFOR
June			orized representativ	e of a member	ALLAHAS ALLAHAS		

Filing Fee: \$25.00