

215000140929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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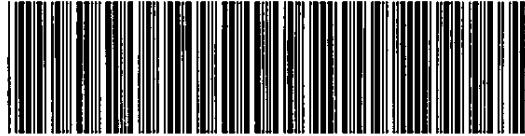
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 19 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NETHOOK LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

UCHECHI A. UKPO

Name of Person

NETHOOK LLC

Firm/Company

3515 NW 213RD STREET

Address

MIAMI GARDENS, FL 33056

City/State and Zip Code

NETHOOKLLC@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

UCHECHI UKPO

Name of Person

954
at ()

Area Code

800-0076

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

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TALLAHASSEE, FL 32301

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NETHOOK LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on AUGUST 18, 2015 and assigned
Florida document number L15000140929.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3515 NW 213RD STREET

MIAMI GARDEN, FL 33056

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3515 NW 213RD STREET

MIAMI GARDEN, FL 33056

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 office address here:

Name of New Registered Agent:

UCHECHI UKPO

New Registered Office Address:

3515 NW 213RD STREET

Enter Florida street address

MIAMI GARDENS

, Florida 33056

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>	<u>Address</u>	<u>Type of Action</u>
MGR	UKPO, UCHE	3515 NW 213RD STREET	<input type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	UKPO, UCHECHI A.	3515 NW 213RD STREET	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	UDONIS, SMART C.	3515 NW 213RD STREET	<input type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	UDONSI, SMART C.	3515 NW 213RD STREET	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Josephine Udo	3515 NW 213RD STREET	<input type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Josephine Ikechukwu	3515 NW 213RD STREET	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated _____, _____

Signature of a member or authorized representative of a member

UCHECHI UKPO

Typed or printed name of signee