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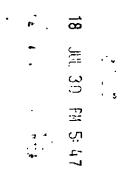
(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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# COVER LETTER

FO: ' Registration Se Division of Cor			
NIKA GRO	OUP LLC		
SUBJECT:	Name of Lim	ited Liability Company	
		) 16 GV	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JUAN LUIS GARCIA GU	TIERREZ	
		Name of Person	<del> </del>
		Firm/Company	
	5147 DELIGHT AV		
		Address	<del></del>
	NORTH PORT. FL 34288	3	
		City/State and Zip Code	
	GENEX_SA@HOTMAIL.		
	E-mail address: (	to be used for future annual report notif	lication)
For further information co	oncerning this matter, please ca	ali:	
JUAN L GARCIA		at ( <u>941)380</u>	-3562
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed 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

(Name of the Limited	Liability Company as it now appears on our records	· · · · · · · · · · · · · · · · · · ·
A)	Liability Company as it now appears on our records Florida Limited Liability Company)	2)
The Articles of Organization for this Limited Liab		and assigned
This amendment is submitted to amend the follow	ring:	JUL 30 PH
A. If amending name, enter the new name of the		- S
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab		
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	•	
B. If amending the registered agent and/or registered agent and/or the new registered office		, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	j
		orida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

MIKA CROUDLIC

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title'	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MARIA A GARCIA	5147 DELIGHT AV	■ Add
		NORTH PORT FL 34288	_ ☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			Remove
			□ Change
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		07/24/19				
ective date, if other than th	e date of filing:	:		(op	tional)	40.5
effective date is listed, the date mee: If the date inserted in this b	ist be specific and colock does not me	cannot be prior to eet the applicab	date of filing or mo le statutory filing	re than 90 days at ; requirements, t	ter filing.) Pursuant his date will not [	t to 605 be liste
	Department of St	ate's records.				
ument's effective date on the I						
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record specifies a delaye he 90th day after the re			an effective ti	me, at 12:01	a.m. on the	
record specifies a delaye	cord is filed.	2018	an effective ti	me, at 12:01	a.m. on the	
record specifies a delaye he 90th day after the re	cord is filed.		an effective ti	me, at 12:01	a.m. on the	~ <del>_</del>
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record specifies a delaye he 90th day after the re	cord is fi <b>led</b> .	2018	an effective ti		a.m. on the	<b>18</b> J. 31
record specifies a delaye he 90th day after the re	cord is fi <b>led</b> .	2018			a.m. on the	<b>18</b> JU 30

Page 3 of 3

Filing Fee: \$25.00

IN WITNESS WHEREOF, the undersigned has caused this Agreement to be duly executed effective as of this 4th day of December 2017.

#### Nika Group LLC

Juan Luis Garcia Gutierrez

As Its: Manager

Nelda Analia Pellegrini

As Its: Manager

Sonia Rosario Penafiel

As Its: Manager

vin Bossicio Perialist

Sonia Rosario Penafiel

Sui Juris

As Its: Member

Juan Luis Garcia Gutierrez

Sui Iuris

As Its: Member

Nelda Analia Pellegrini

Sui Juris

As Its: Member

Maria Alejandra/Garcia Pellegrini

Luis Fernando Enrique Garcia Pellegrini

Sui Iuris

As Its: Member

### **EXHIBIT A**

## TO LIMITED LIABILITY COMPANY OPERATING AGREEMENT NIKA GROUP LLC

NAME AND ADDRESS OF MEMBER	INITIAL CAPITAL CONTRIBUTION	MEMBERSHIP PERCENTAGE
Nelda Analia Pellegrini, Maria Alejandra Garcia Pellegrini, and Luis Fernando Enrique Garcia Pellegrini as joint tenants with rights of survivorship Condominio Montibello 40 Santa Cruz De La Sierra, Sc 10260 Bo	212.170 s USD	49%
Juan Luis Garcia Gutierrez, Maria Alejandra Garcia Pellegrini, and Luis Fernando Enrique Garcia Pellegrini as joint tenants with rights of survivorship Condominio Montibello 40 Santa Cruz De La Sierra, Sc 10260 Bo	2-16, 5-00. — S USD	50%
Sonia Rosario Penafiel, Maria Alejandra Garcia Pellegrini, and Luis Fernando Enrique Garcia Pellegrini as joint tenants with rights of survivorship 1104 Agnew Drive Rockville, Md 20851	4.330 s USD	ι%