11800098857

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600312320556

04/26/18--01018--015 **60.00



APR 27 ATT NARRIS

COVER LETTER

Division of Cor Ngouke Hu	klings LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Aaron Parthemer		
		Name of Person	
	PMG Private CFO Service	5	
		Firm/Company	
	333 Lns Olas Way, CU 4,	Suite 402	
		Address	
	Fort Lauderdale, FL 33301	I.	
		City/State and Zip Code	<u></u>
	sarun@pmgcfo.com		
	E-mail address: (to be used for future annual report notal	(cation)
For further information (concerning this matter, please of	all:	
Aaron Parthemer		954 536-1556	
Name o	of Person	Area Code Daytime	Tetephone Number
Enclosed is a check for t	he following annuant:		,
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	2 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
36 4 17	ING ADDRESS	STREET/COURT	ER ADDRESS:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Bux 6327 Tallahassee, FL 32314

Registration Section

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

Ngouke Holdings, 1.1.C			
(Name of the Limited Liability Company as (A Florida Limited Liability)	it now appears on our records.) Ty Company)		
The Articles of Organization for this Limited Liability Company were	filed on 4/19/2018	and assi	gned
Florids document number 1.18000098857			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company bere:		
Ngakooe Holdings, LLC			
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC"	or the abbreviation "L.1	.C."
Enter new principal offices address, if applicable:		100 M	麗
(Principal office address MUST BE A STREET ADDRESS)			(COM)
		11111	70 mm
_			2
Enter new mailing address, if applicable:		1 D sup	2-11
(Mailing address MAY RE A POST OFFICE BOX)		7 (5)	AK PANANG
_		The second	
		24	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records,	enter the name	of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street uddress	· · · · · · · · · · · · · · · · · · ·	
	Flor	rida	
	City	Zip Code	

New Registered Apent'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

Title	<u>Name</u>	Address	Type of Action
MGR	Yannick Ngakoue		[] Add
			_ □ Remove
			☐ Change
			☐ Remove
			☐ Change
			☐ Acld
			☐ Remove
			☐ Change
			O Remove
			Change S
			DAM 22
			Remove
			Remove O
		- Nu	☐ Remove

_ [] Change

managing member of Yannick Ngakouc. Howe	ever, when it was originally submitted online, the n	ame was entered
incorrectly. The EIN Number application had t	the correct spelling of the LLC name and the last to	mmc of the
member. You can resend corrected documents	by email to zaron@pingefo.com	***************************************
*** <u>**********************************</u>		
		
- de - Marie	A	
Martine date. If other than the date of fillings	Canting	_f)
Meetive date, if other than the date of filing:	not be prior in date of filling or more than 90 days after fil	at.) ing.) Piu rsi-sos to 605.0207 (3)(b).
ote: If the date inserted in this block does not meet accument's effective date on the Department of State	use applicante statutory thing requirements, this of 's records.	Mr will not be listed as the
e record specifies a delayed effective date The 90th day after the record is filed.	e, but not an effective time, at 12:01 a.m	a. on the earlier of:
ancd April 19 2	018	
. /)	•	
- m		7 7
Signature of a mem	ther of authorized representative of a member	1900 P
/		** ·

Page 3 of 3

Filing Fee: \$25.00