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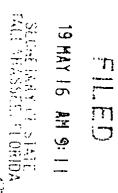
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COVER LETTER

TO:

то:	Registration Se Division of Cor			
01 / IX I X		TERNATIONAL GROUP LLC		
SUBJI	r.C1:	Name of Limite	d Liability Company	
The en	closed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please	return all correspo	ndence concerning this matter to	the following:	
		FELIX NZENGUNG		
			Name of Person	
		FELAH INTERNATIONAL	, GROUP LLC	
			Firm/Company	
		3100 MICHELLE CT		
			Address	
		GREEN COVE SPRINGS F	L 32043	_
			City/State and Zip Code	
		afuamenya@yahoo.co.uk		
			be used for future annual report no	affication)
ror tur	ther information c	oncerning this matter, please call	;	
FELIX	NZENGUNG		301 379-8111 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Be	ING ADDRESS: ation Section of Corporations ox 6327 assec, FL 32314	STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FELAH INTERNATIONAL GROUP 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 $\frac{04/02/2019}{1}$ and assigned Florida document number L19000091254 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the no registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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

Page 1 of 3

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.

MGR = M $AMBR = M$	lanager Authorized Member	
<u>Title</u>	<u>Name</u>	Address Type of Action
MGR	FELIX NZENGUNG	3100 MICHELLE CT GREEN COVE SPRINGS FL 32043
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) Sig	gnature of a member	n or authorized	representative (of a member			
FELIX NZENGUNG							
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Filing Fee: \$25.00