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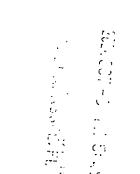
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COVER LETTER

TO:

FO: Registration Division of C			
	N USA. LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	SANDRA PATRICIA HE	RRERA RIOS	
		Name of Person	
	PHOTON USA, LLC		
	Articles of Amendment and fee(s) are submitted for filing. All correspondence concerning this matter to the following: SANDRA PATRICIA HERRERA RIOS Name of Person PHOTON USA, LLC Firm/Company 7525 E TREASURE DR, APT, 611 Address NORTH BAY VILLAGE, FL 33141 City/State and Zip Code SPHRMIAMI@GMAIL.COM E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: ATRICIA HERRERA RIOS Name of Person Area Code Daytime Telephone Number check for the following amount:		
	7525 E TREASURE DR. A	APT. 611	
		Address	
	NORTH BAY VILLAGE,	F1, 33141	
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			fication)
For further information		·	
	-		
		at ()	ne Telephone Number
		, , , , , , , , , , , , , , , , , , ,	
Enclosed is a check fo	r the following amount:		
□ \$25.00 Filing Fee		-	
P.O. Box 6	n Section Corporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHOTON USA, LLC

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were filed on	24 and assigned
lity company here:	
ty Company," the designat	ion "LLC" or the abbreviation "L.L.C."
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ddress on our record	s, enter the name of the new registered
Enter Florida str	vet address
	, Florida
City	Zip Code
	ity. I further agree to comply with the uties, and I am familiar with and
	lity company here: ty Company," the designate ddress on our record Enter Florida stra

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
			□Remove
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Typed or printed name of signee