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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations				
CUD INCT	777 INTERNATI	ONAL TRADING LLC			
SUBJECT:	Name of Lin	nited Liability Company			
	f Amendment and fee(s) are sub ondence concerning this matter	•			
		MONICA GERMAN			
	Name of Person				
	OFFICE SYSTEMS INC				
Firm/Company					
8637 ESCONDIDO WAY EAST					
		Address			
	В	OCA RATON, FL 33433			
		City/State and Zip Code			
		TAXSOL@GMAIL.COM to be used for future annual report notification)			
For further information	concerning this matter, please c	·			
MONICA GERMAN		954 554-7424 at ()			
Name	of Person	Area Code 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			
Mailing Address Registration Division of G P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

777 INTERNATIONAL T	RADING LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on 10/14/2019	and assigned
Florida document number L19000257362		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	oility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	7779 CLOVERFIELD CIRCLE	·· <u></u> ··
······································	BOCA RATON, FL 33433	
Enter new mailing address, if applicable:	7779 CLOVERFIELD CIRCLE	
Mailing address MAY BE A POST OFFICE BOX)	BOCA RATON, FL 33433	
Hading duties MAT BE A FOST OFFICE BOAJ		,
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the nate of	ne of the new registe
, <del>, , , , , , , , , , , , , , , , , , </del>	, Florida _	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 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
MGR	MERVIN PARDO	1601 SW IST WAY, SUITE D-13	□ Add
		DEERFIELD BEACH, FL 33441	≅Remove
MGR	ALEXANDER PEREZ	347 NW 48 AVENUE	⊞Add
		DEERFIELD BEACH, FL 33442	Ωn
			☐ Change
		· <del></del> ·····	□Add
		[	□Remove
			☐ Change
<del></del>			□ Add
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			Change

N/A			
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ctive date, if other than th	e date of filing:	(opt	tional)
effective date is listed, the date m	ust be specific and cannot be prior to dat block does not meet the applicable s	e of filing or more than 90 days afte	er filing.) Pursuant to 605.03 ais date will not be listed
	Department of State's records.		***
			<u>.</u>
	ive date, but not an effective time, a	t 12:01 a.m. on the earlier of: (	b) The 90th day after t
i filed.			,
JUNE 18	2024		•••
ed	, * *	1. 00	:
		1/le 1	
	Signature of a member or authorized	representative of A member	