

L10000114810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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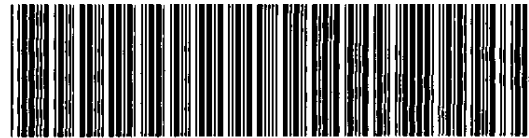
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK  
NOV 30 2010  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Virtual Traders LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter A. Cohen  
Name of Person

Virtual Traders LLC  
Firm/Company

~~11573 NW~~ 11573 NW 80 St  
Address

Doral, FL 33178  
City/State and Zip Code

pcohen1@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Cohen at (305) 343-1725  
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 & 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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Virtual Teachers 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 November 4, 2010 and assigned Florida document number L10000114810

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 end with 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)**

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**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*City*

*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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member


Title	Name	Address	Type of Action
MGR	Cohen Peter A	11573 NW 80 Street Doral, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	DIAZ, FRANCISCO J	267 Miranda Ave Suite 300 Coral Gables, FL 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Perez, Alberto	14271 SW 36 Street MIAMI, FL 33175	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Sanchez, Luis A	4809 Volunteer Rd Southwest Ranches, FL 33330	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Perez, Eduardo A	4545 NW 111 Ct Doral, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Pereira, Jorge M	8532 NW 109 Ct Doral, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

*please see attached papers.*

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 TALLAHASSEE, FLORIDA

Dated 11/23/2010

  
 Signature of a member or authorized representative of a member  
Peter Cohen  
 Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Cohen, Peter A	11573 NW 82 Street Doral, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	DIAZ, FRANCISCO J	267 Miracca Ave Suite 300 Coral Gables FL 33134	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Perez, Alberto	14271 SW 36 Street Miami, FL 33175	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Sanchez, Luis	4809 Volunteer Rd Southwest Ranches, FL 33330	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Perez, Eduardo	4545 NW 111 Ct Doral, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Pereira, Jorge N	2532 NW 109 Ct Doral, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 23, 2010.



Signature of a member or authorized representative of a member

Peter Cohen

Typed or printed name of signee

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