

**2018 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M02000002930

**Entity Name:** CAI TRADING, LLC

**Current Principal Place of Business:**

2525 PONCE DE LEON BLVD  
SUITE 1100  
CORAL GABLES, FL 33134

**Current Mailing Address:**

15407 MCGINTY RD W  
WAYZATA, MN 55391 US

**FEI Number:** 68-0527843

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name CANNAVINA, GUSTAVO  
Address 15407 MCGINTY RD W - MS26  
City-State-Zip: WAYZATA MN 55391

Title ASSISTANT SECRETARY  
Name SCHULTENOVER, TRACY  
Address 15407 MCGINTY RD W MS26  
City-State-Zip: WAYZATA MN 55391

Title AUTHORIZED MEMBER  
Name JUNG, JULIEN  
Address 15407 MCGINTY RD W MS26  
City-State-Zip: WAYZATA MN 55391

Title AUTHORIZED MEMBER  
Name MAROTTA, LISANDRO  
Address 15407 MCGINTY RD W MS26,  
City-State-Zip: WAYZATA MN 55391

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TRACY SCHULTENOVER

**ASSISTANT SECRETARY** 05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date