

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000002930

**Entity Name:** CAI TRADING, LLC

**Current Principal Place of Business:**

9320 EXCELSIOR BLVD  
HOPKINS, MN 55343

**Current Mailing Address:**

9320 EXCELSIOR BLVD  
HOPKINS, MN 55343 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 QUEIROZ, ANA C  
Address 15407 MCGINTY RD W - MS26  
City-State-Zip: WAYZATA MN 55391

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

Title AUTHORIZED MEMBER  
Name KADAVY, GRANT DAVID  
Address 15407 MCGINTY RD W MS26  
City-State-Zip: WAYZATA MN 55391

Title AUTHORIZED MEMBER  
Name ESTRADA, LUIS ENRIQUE  
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:** LORI WARD

ASSISTANT SECRETARY 04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date