

F05000003252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

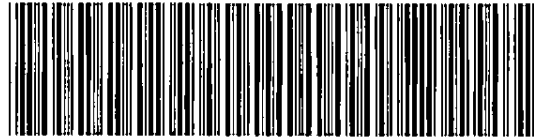
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900411446699

W23-96642

NK Amend

FILED  
2023 JUL 13 AM 9:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2023 JUL 13 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. RAMSEY

JUL 19 2023

\*02250, 00524, 00671



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 14, 2023

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: UPS TRADE MANAGEMENT SERVICES, INC.  
Ref. Number: F05000003252

**RESUBMIT**

Please give original  
submission date as file date.

We have received your document for UPS TRADE MANAGEMENT SERVICES, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The form that you submitted is incorrect. It is for a Florida profit corporation and your entity is a foreign corporation. I have enclosed the correct form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey  
OPS

Letter Number: 323A00015684

2023 JUL 18 AM 11:13



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations  
From: Alexxis Weiland-Sorenson  
Ext: 61592  
Date: 07/13/23  
Order #: 1233056-1  
Re: UPS Trade Advisory Services, Inc.  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Supporting Documents

Amount to be deducted from our State Account: \$35.00 - FL State Account Number:  
120000000195

Authorization:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the word 'Authorization:'.

Please take the following action:

File in your office on basis  
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** UPS Trade Management Services, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Contact Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

FILED  
2023 JUL 13 AM 9:57  
CLERK OF THE COURT  
STATE OF FLORIDA

\_\_\_\_\_  
(Document number of corporation (if known))

1. UPS Trade Management Services, Inc.

\_\_\_\_\_  
(Name of corporation as it appears on the records of the Department of State)

2. New Jersey

\_\_\_\_\_  
(Incorporated under laws of)

3. May 24, 2005

\_\_\_\_\_  
(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? June 28, 2023

5. UPS Trade Advisory Services, Inc.

\_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

\_\_\_\_\_  
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

NA

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

NA

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent NA

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Ryan Swift

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

**FILING FEE \$35.00**

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
CERTIFICATE OF NAME CHANGE

**UPS TRADE ADVISORY SERVICES, INC.**

I, the Treasurer of the State of New Jersey, do hereby certify,  
that on June 28, 2023, a name change certificate  
was duly filed in this office, changing the business name from  
**Ups Trade Management Services, Inc.**

to:

**Ups Trade Advisory Services, Inc.**



Certificate Number: 145142108

Verify this certificate online at

<https://www.njportal.com/DOR/taxicertrecords/Validate.aspx>

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
12th day of July, 2023

A handwritten signature in cursive script, appearing to read "Elizabeth Maher Muolo".

Elizabeth Maher Muolo  
State Treasurer