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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994

: (305)444-4977 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN F 7 TRADING LLC

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Corporate Filing Menu

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	ART	ICLES OF OR OF	GANIZATIO	ON COCHTAGE TALLAHASSER	TENTATE ELORIDA
		ADING, LLC	es it now annears or	our records.)	
	(CAME OF THE MANA	ted Lisbility Company (A Florida Limited Lis	oility Company)		
	of Organization for this Limited L ment number		ere filed on	08/23/2007	and assigned
This amenda	nent is submitted to amend the foll	owing;			
A. If amend	ling name, <u>enter the new name c</u>	of the limited liabilit	y company here:		
The new name :	must be distinguishable and contain the	words "Limited Liability	Company," the desig	mation "LLC" or the abbr	eviation "L.L.C."
Enter new p	rincipal offices address, if applic	cable:	1825 Ponce De Lec	มา Blvd.#680	
-	fice address MUST BE A STREE		Coral Cables, FL 3	3134	
Enter new n	nailing address, if applicable:		1825 Ponce De Lec	on Blvd. # 680	· · · · · · · · · · · · · · · · · · ·
	tress MAY BE A POST OFFICE	BOX	Coral Gables, FL3	3134	
(Industry and		<u> </u>			
	nding the registered agent and gent and/or the new registered o		ce address on o	ur records, <u>enter th</u>	ne name of the new
. <u>Na</u> r	ne of New Registered Agent:	·			
Nac	w Registered Office Address:	2222 Ponce De Li	eon Blvd, Suite 300		
1161	Treditioned Office Light 699		Enter Florida	street address	
		Coral Gables		, Florida	4
			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 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 Changing Registered Agent, Signature of New Registered Agent

_ 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			☐ Remove
		1825 Ponce De Leon Blvd. # 680 Corst Gables, FL 33134	Change
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		are of a member or authorized representative of a member	····
uled	October 17	2019	
The 90	th day after the record is	filed.	
e record	d specifies a delayed effec	tive date, but not an effective time, at 12:0	1 a.m. on the earlier of
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nective (an effective lose: If the	nate, if other than the date of e date is listed, the date must be spo- te date interted in this block dos	of filling: (0 cific and cannot be prior to date of filling or mose than 90 days a continued the applicable statutory filing requirements,	peronary ifter filing.).Pursiant to 605,0207 this date will not be listed as
	described and the second	CPV	-45- n-d)
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