

LD9000064098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

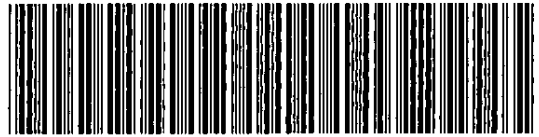
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FILED
2009 AUG 27 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG 28 2009

EXAMINER

3rd WAVETRADER

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Articles of Amendment for Document L09000064098 (The 3rd Wave
Trader's Report LLC)

Dear Sir or Madame:

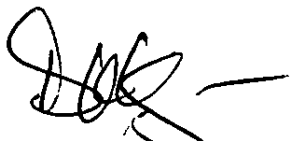
Please accept and process these Articles of Amendment to the Articles of
Organization for The 3rd Wave Trader's Report LLC (L09000064098). We are
adding David W. Weigman as the new Managing Partner for the LLC.

Please do not hesitate to contact us with any questions at 561-310-1971 (Mr.
Weigman) or 954-655-2923 (Mrs. Thielen).

Thank you,



Mara K. Thielen



David W. Weigman

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

3RD WAVE TRADER'S REPORT 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:

MARA THIELEN

Name of Person

3RD WAVE TRADER'S REPORT LLC

Firm/Company

1041 HAMLIN TERRACE

Address

DAVIE, FL 33325

City/State and Zip Code

~~3RD~~ MARA @ 3RD WAVE TRADER. COM

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

For further information concerning this matter, please call:

DAVID WEIGMAN

Name of Person

at (561) 310-1971

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

THE 3RD WAVE TRADER'S REPORT 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 7/2/2009 and assigned
Florida document number L09000064098

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)

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:

DAVID W. WEIGMAN

New Registered Office Address:

SAME

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.

X [Signature]
If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>DAVID W. WEIGMAN</u>	<u>1041 HAMLIN TERR.</u> <u>DAVIE, FL 33325</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>MARA K. THIELEN</u>	<u>1041 HAMLIN TERR.</u> <u>DAVIE, FL 33325</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated August 19, 2009

Mara Thielen
Signature of a member or authorized representative of a member

MARA K. THIELEN
Typed or printed name of signee

2009 AUG 27 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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