L10000047401

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J. BRYAN

MAY 11 2011



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COVER LETTER

TO: **Registration Section Division of Corporations**

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SUBJECT:

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Tradja 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:

I.	6	C C		
		Nicole Deitrick		
	Name of Person			
Tradeja LLC				
Firm/Company			AS 1	
907 25th Drive East		FILED HAY 10 PH 2: 27 ECRETARY OF STATT LLAHASSEE: FLORI		
		Address	ARY OF S	
Ellenton, FL 34222				
	City/State and Zip Code		LORID	
		nicole@tradeja.net to be used for future annual report notificat		
	concerning this matter, please o		6-2698	
Name of Person		Area Code & Daytime Te	slephone Number	
Enclosed is a check for	the following amount:			
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Cente	ons	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida)	Tradja LLC <u>v Company as it now appear</u> Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability C Florida document number L10000047401	Company were filed on	May 5, 2010	and assigned		
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the lim</u>	<u>ited liability company her</u> Fradeja LLC	<u>e</u> :	TLC" or the abbreviation		
The new name must be distinguishable and end with the wor		ny," the designation	'LLC" or the abbreviation		
"L.I.C."			RITE		
Enter new principal offices address, if applicable:			F##		
(Principal office address MUST BE A STREET ADDE	RESS)				
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>					
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:					
New Registered Office Address:					
	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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action				
	<u> </u>		Add Remove				
			Add Remove				
	·		Add Remove				
			Add Remove				
			Add Remove				
			Add Remark				
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	TARY OF STATE				
	······		ELORIDA				
			-				
Dated	May 6 201	authorized representative of a member					
	Nic	ole A. Deitrick					
Page 2 of 2							
Filing Fee: \$25.00							