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B. BOSTICK
DEC 1 8 2012
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
Bivision of corporations				
SUBJECT: STKTRADING U.C.				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Shadla Sagah Name of Person				
STKTRADINX LLC				
13184 W 29 8TREET. Address	教 在 	12 DEC		
Muramay, FL 33025 City/State and Zip Code	2	17 PM 3		
SSABAGH STKTRADIO E-mail address: (to be used for future annual report notification)	<u> </u>	3: 26 LIGHTON		
For further information concerning this matter, please	e call:			
Shade Sabagh at 95	Area Code & Daytime Telephone Num	nber		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: STKTR	aping uc		
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	ny: 12184 mu 29 dT Miramar, FL 33027		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO BOX 260810 POMBRIKE		
3. Date of filing/registration in Florida	11000079589 4. Document number		
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept of State:		
Registered Agent:	shadia SaBana I		
Registered Office Address:	8254 NW 70 8TF 7		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address			
NEW Registered Agent:	Shadia Sabaya		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13184 W 298T MIR9MOR FL 33027		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change (the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member. Printed or typed name of signee I hereby accept the appointment as registered agent and	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote of vise provided in the articles of organization or		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability compa	roper and complete performance of my duties, position as registered agent as provided for in perely reflect a change in the registered office ny has been notified in writing of this change.		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00