## L12000093427

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J. BRYAN
MAY - 1 2012

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Technical Anaylsis Trading Systems 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:
Adam Edgington Name of Person
Technical Analysis Trading Systems LCC
2215 Cluster Oak Dr, Ste 2 PS 第五
Clymont, FL 34711  City/State and Zip Code  E-mail address: (to be used for future/annual report notification)  Description:  City State and Zip Code  E-mail address: (to be used for future/annual report notification)
For further information concerning this matter, please call:
Adam Edgington at (352) 552-4682  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  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

Technical Araylsis	Trading Systems LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y <u>as it now app∲ars oh our records.</u> ) ability Company)		
The Articles of Organization for this Limited Liability Company villerida document number <u>L12000053427</u> .	were filed on 4 19 2012 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
Technical Analysis Tradina The new name must be distinguishable and end with the words "Limite "L.L.C."	Systems 1 LC ad Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	TARET TO THE PROPERTY OF THE P		
Enter new mailing address, if applicable:	SSE 38 m		
(Mailing address MAY BE A POST OFFICE BOX)			
·	OR I		
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here			
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

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

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<del> </del>	<del> </del>		Add Remove
			Add Remove
			Add Remove
			Add Remove
	•		]Add □ Remove
			]Add ]Remove
D. If amer	nding any other information,	enter change(s) here: (Attach additional sheets, if necessar	2012 APR 30 AM 8: 14 SEGRETARY OF STATE STALLANASSEE FLORIDA
Dated	April 26  Mu Signatura  Adam E	Molm  Joing to O  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00