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(Re	equestor's Name))	
(Ac	idress)		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

Registration Section

TO:

Division o	f Corporations		0		
SŲBJECT:	SWINGTRA	ADERONLINE, LLC	DINISION 25 PK		
- 1	Name of Lim	nited Liability Company	\$2.00 T		
			19		
The enclosed Articl	es of Amendment and fee(s) are su	ubmitted for filing.	\$		
Please return all cor	respondence concerning this matte	er to the following:			
	 	GUY K DRIVER			
		Name of Person			
	SWINGTRADERONLINE, LLC				
		Firm/Company			
	1324 SEVEN SPRINGS BLVD, STE 304				
		Address			
		TRINITY, FL, 34655			
		City/State and Zip Code			
		SWINGTRADERONLINE.COM			
		(to be used for future annual report notification)			
For further informat	tion concerning this matter, please	call:			
	GARY	at (727) 2168631			
N	ame of Person	Area Code & Daytime Telephone Number			
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	ce \$\bigsiz \\$30.00 \text{Filing Fee & Certificate of Status}	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enc			
MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS:			
		Registration Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			
•		Tallahassee, FL 32301			

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

- All	TICES OF AMENDINE		
	TO		9,00
ART	TICLES OF ORGANIZAT	ION	1 TO CO
•	OF		The British
			The state of
; SM	/INGTRADERONLINE, L	1.0	LOWER REPORT
(Name of the Limite	d Liability Company as it now apper A Florida Limited Liability Company	ars on our records.)	🔩 🐉
	A Florida Limited Liability Company)		
		05400040	
he Articles of Organization for this Limited	Liability Company were filed on	05/10/2012	and assigned
lorida document number L1200006	3587		
his amendment is submitted to amend the fo	ilowing:		
A. If amending name, enter the new name	of the limited lighility company he	ere.	
r is amending name, enter the new fighte	OF THE INDICES HADRES COMPANY IS	<u>.1 C</u> .	
he new name must be distinguishable and end w	vith the words "Limited Liability Comp	oany," the designation "	LLC" or the abbreviation
L.L.C."			
Enter new principal offices address, if appl	icable:		,
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)		
		······································	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	E BOX)		
			
3. If amending the registered agent and		our records, enter	the name of the new
egistered agent and/or the new registered	office address here:		
Name of New Registered Agent:	GUY K DRIVER		
Hanne of Hew McRistered Watti			
New Registered Office Address:			
	E	nter Florida street add	dress
		, 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, hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

Is 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

Title	<u>Name</u>		Address	Type of Action
MGR	GUY K DRIVER		1324 SEVEN SPRINGS BLVD STE 304 TRINITY, FL 34655 US	Add Remove
MGR_	GARETH C FIC	HARDT	1324 SEVEN SPRINGS BLVD STE 304 TRINITY, FL 34655 US	Add Remove
1-1-1				Add Remove
	 			Add Remove
				Add Remove
				AddRemove
D. If amen	ding any other informa	tion, enter change((s) here: (Attach additional sheets, if necessary.) —
Assiria				
 Dated	JUNE 6TH	, 201	2	
	Sig	<i>D</i> ,	or authorized representative of a member	
			JY K DRIVER	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

Filing Fee: \$25.00