# L12000 114594

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12 SEP 27 AH II: 00

SECHERARY OF STATE DIVISION OF CORPORATIONS

SEP 2 8 2012

T. HAMPTON

## COVER LETTER

Division of Corp			
SUBJECT:	radingvi	est Latam, LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		Eduardo Gils	
		Name of Person	<del></del>
	Tra	adingvest Latam, LLC	
		Firm/Company	
	1990	Main Street, Suite 750	
		Address	
	Sa	rasota, Florida, 34236	
		City/State and Zip Code	
	E-mail address: (t	uardo@ingegils.com o be used for future annual report notifical	tion)
For further information co	oncerning this matter, please c	all:	
Edu Name of	ardo Gils		1475253
Name of	rerson	Area Code & Daytime T	elepnone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

## 1?! SCARLATELLI P.A. THE IMMIGRATION LAW FIRM

Registration Sectioni
Division of Corporations
P.O. Box 6327
Tallahassee
FL 32314

September 20th, 2012.

Dear Sirs,

Please find enclosed the completed and duly Eighed forms to request an amendment to the Articles of Organization for Tradingrest Latam, LLC.

Sincerely,

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SEGRETARY OF STATE DIVISION OF CORPORATIONS

Tradingvest Latam, LLC

12 SEP 27 AM 11: 01

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company L12000114594  Florida document number	September 6, 2012		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab			
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	1990 Main Street		
(Principal office address MUST BE A STREET ADDRESS)	Suite 750		
	Sarasota, Florida, 34236		
Enter new mailing address, if applicable:	1990 Main Street		
(Mailing address MAY BE A POST OFFICE BOX)	Suite 750		
	Sarasota, Florida, 34236		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her			
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, 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>	Type of Action
MGR 	Donna Scarlatelli	777 S Palm Ave, Suite 5 Sarasota, Florida 34236	
<del></del>			dd Remove
			dd emove
			_□□dd □□□emove
			_□□dd _□□□emove
			ddd Cr_emove 
D. If ame	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
- - -			SECRETARY OF SIDINISION OF CORPORAL  12 SEP 27 AMII
Dated	September 18	-2012 - Spring to the	STAIL ORATIONS
	Signature of a m	nember or authorized representative of a member	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00