

L13000060631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

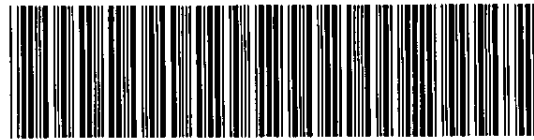
(Business Entity Name)

(Document Number)

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RECEIVED
DIVISION OF STATE
REGISTRATION
2014 OCT 31 PM 4:36
TO REGISTERED
SUPPORT OF FILING

FILED
14 OCT 31 PM 2:25
DIVISION OF STATE
TALLAHASSEE, FLORIDA

NOV - 3 2014

T. BROWN



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 359581 7278303

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : October 31, 2014

ORDER TIME : 2:06 PM

ORDER NO. : 359581-005

CUSTOMER NO: 7278303

DOMESTIC AMENDMENT FILING

NAME: TRADEREV USA LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
14 OCT 31 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRADEREV USA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/25/2013 and assigned
Florida document number L13000060631.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

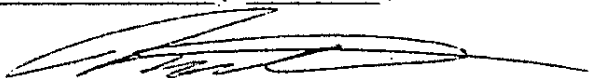
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Daniel M. Fields	350 S. LAKE DESTINY DRIVE ORLANDO, FL 32810	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Stephane St. Hilaire	13085 Hamilton Crossing Blvd Carmel, IN 46032	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Peter Kelly	2200 Bridge Parkway Suite 202 Redwood City, California 94065	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	JAMES TANI	2118 Shady Glen Road Oakville, Ontario L6M 3N8	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 31, 2014



Signature of a member or authorized representative of a member

Mark Endras

Typed or printed name of signee