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Office Use Only



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## **COVER LETTER**

TO:	Registration Section
	Division of Cornerations

**BOER TRADING 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:

Name of Person

**Boer Trading LLC** 

Firm/Company

14201 W. SUNRISE BLVD 105

Address

SUNRISE, FL 33323

City/State and Zip Code

jacob@ivyfa.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ye Zhang

<sub>"/</sub>305<sub>、</sub>310-0315

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOER TRADING LLC			
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)		
(AT TORGAL STATES COMPANY	,		
The Articles of Organization for this Limited Liability Company were filed on $\underline{0}$	4/30/2013	_ and assi	gned
Florida document number L13000063018			-
,			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company h	<u>ere</u> :		
The new name must be distinguishable and end with the words "Limited Liability Com"L.L.C."	pany," the designation "LLC	or the al	bbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<u></u>	<del>22</del>	
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<del></del>	>5.	7=	magassa.
Enter new mailing address, if applicable:	A SSE	5	-
(Mailing address MAY BE A POST OFFICE BOX)	راد. ت بيغ		111
THUMING WAGESS MAT BE A FOST OF FICE BOA)	<b>₩</b>		Nasad
	<u> </u>		
B. If amending the registered agent and/or registered office address or			f the new
registered agent and/or the new registered office address here:	, <del></del>		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address	s	
	. Florida		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Title <u>Name</u> <u>Address</u> Type of Action XI, BO **MGRM** 14201 W SUNRISE BLVD SUITE 105 SUNRISE, FL 33323 Remove BOER GROUP, INC. 14201 W SUNRISE BLVD SUITE 105 **MGRM** SUNRISE, FL 33323 Remove Remove Remove

	ang any other mit	ormation, enter change(s) here: (Attach additional sheets, if necessa	· y.)
_			
		Ne 46	
	Ye Zhang	Signature of a member or authorized representative of a member	
		Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00