## U13600 110473

(Re	equestor's Name	)
(Ac	Idress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	ame)
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Certified Copies	Certificate	es of Status
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## **COVER LETTER**

TO:	egistration Section Division of Corporations		
SUBJE	: 10 Trading LLC		
	Name of Limited Liability Company		
The enc	sed Articles of Amendment and fee(s) are submitted for filing.		
Please re	urn all correspondence concerning this matter to the following:		
	Husam Bahhur		
	Name of Person		
	Firm/Company		
	2599 NW 49th Ave		
	Address		
	Boxa Ration FL 33434		
	City/State and Zip Code		
	E-mail address: (to be used for future annual report notification)		
For furth	information concerning this matter, please call:	TAN 13	
H	5am Bahhur at (305) 710 6965	AUG CARETE LAHA	Ell Communication of the Commu
	Name of Person at (300) 1700 403  Area Code & Daytime Telephone Number	285	FILLE
		THE THE	In strate
Enclosed	s a check for the following amount:	STATE OR	alenda granaerid
\$25.0	(additional copy is enclosed) Certified	te of Status &	~

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

710 7	rading	LLC			-
( <u>Name of the Limited Lia</u> (A Flo	rida Limited Lia	y as it now appears on on ability Company)	ur recoras.)		
The Articles of Organization for this Limited Liabil Florida document number L 1300011 64-	lity Company v 73	vere filed on 8 5	2013	and a	assigned
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liabil	i <u>ty company here</u> :			
The new name must be distinguishable and end with th "L.L.C."	e words "Limite	d Liability Company," th	e designation	"LLC" or th	 ne abbreviation
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	DDRESS)			<del> </del>	
			f	<u> </u>	
		·		SEC	ユ ン フ
Enter new mailing address, if applicable:				AP S	5
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>			SS	3 ;*** <u>**</u>
				MC T	<u> grang</u>
				15.	2 terri
B. If amending the registered agent and/or registered agent and/or the new registered office	registered offi	ce address on our re	cords, enter	The name	e of the nev
registered agent and/or the new registered office	auui ess nei e.			<b>&gt;</b>	
Name of New Registered Agent:					
New Registered Office Address:					
		Enter Flo	orida street ad	idress	
-			, Florida _		
		City		Zip Co	ode

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>	Name	Address	Type of Action
MG-R	Husom Bahhur	2599 NW 49+57	Add
		Boca Ratur FL 33434	Remove
			<u>-</u>
			Add
			Remove
			 Add
		AL L	Remove
		AHASSE	WG 12
		ALLAHASSEE, FLORIDA	Add
			Remove
			Add
			Remove
			_
			Add
			Remove

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	8/5/13
	Signature of a member or authorized representative of a member  HUSAM  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 AUG 12 PH 12:14
SECRE DANY OF STATE
JALLAHASSEE, FLORIDI