

# L13000120684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

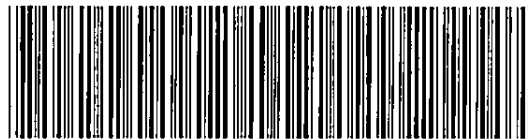
(Business Entity Name)

(Document Number)

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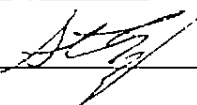
# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

STINGRAY TRADING LLC

Please Debit FCA000000003 For: 25

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

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Art of Inc. File \_\_\_\_\_  
LTD Partnership File \_\_\_\_\_  
Foreign Corp. File \_\_\_\_\_  
L.C. File \_\_\_\_\_  
Fictitious Name File \_\_\_\_\_  
Trade/Service Mark \_\_\_\_\_  
Merger File \_\_\_\_\_  
Art. of Amend. File \_\_\_\_\_  
RA Resignation \_\_\_\_\_  
Dissolution / Withdrawal \_\_\_\_\_  
Annual Report / Reinstatement \_\_\_\_\_  
Cert. Copy \_\_\_\_\_  
Photo Copy \_\_\_\_\_  
Certificate of Good Standing \_\_\_\_\_  
Certificate of Status \_\_\_\_\_  
Certificate of Fictitious Name \_\_\_\_\_  
Corp Record Search \_\_\_\_\_  
Officer Search \_\_\_\_\_  
Fictitious Search \_\_\_\_\_  
Fictitious Owner Search \_\_\_\_\_  
Vehicle Search \_\_\_\_\_  
Driving Record \_\_\_\_\_  
UCC 1 or 3 File \_\_\_\_\_  
UCC 11 Search \_\_\_\_\_  
UCC 11 Retrieval \_\_\_\_\_  
Courier \_\_\_\_\_

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

**2024 MAR 13 PM 12: 04**

STINGRAY TRADING LLC

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

TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/01/2016 and assigned Florida document number L13000120684.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

1400 VILLAGE SQ BLVD #3-13

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

TALLAHASSEE, FL 32312

**Enter new mailing address, if applicable:**

1400 VILLAGE SQ BLVD #3-13

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

TALLAHASSEE, FL 32312

**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:

Orlando R. Cicilia, Esq.

New Registered Office Address:

10800 Biscayne Blvd., Suite 700

*Enter Florida street address*

Miami

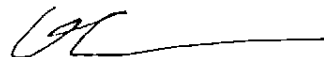
*City*

, Florida 33161

*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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	MAHMOUD AMROUCH	1400 VILLAGE SQ BLVD #3-13	<input checked="" type="checkbox"/> Add
		TALLAHASSEE, FL 32312	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WALID AMROUCH	1400 VILLAGE SQ BLVD #3-13	<input checked="" type="checkbox"/> Add
		TALLAHASSEE, FL 32312	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HUSSAIN AL-ALI	1400 VILLAGE SQ BLVD #3-13	<input checked="" type="checkbox"/> Add
		TALLAHASSEE, FL 32312	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HASSAN AL-ALI	1400 VILLAGE SQ BLVD #3-13	<input checked="" type="checkbox"/> Add
		TALLAHASSEE, FL 32312	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	DIANA HAMER	1895 IXORA RD	<input type="checkbox"/> Add
		NORTH MIAMI, FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	ROBERT EUGENE HAMER JR	1895 IXORA RD	<input type="checkbox"/> Add
		NORTH MIAMI, FL 33181	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 13, 2024



MAIMOUN AMROUCH

Typed or printed name of signee

**Filing Fee: \$25.00**