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DIVISION OF COMPRIANTIONS
14. JUN 16 PM 1: 33

JUN 17 2014 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Deep Sea Trading Group, 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:
Euronda J. Elam-Barnett Name of Person
Deep Sea Trading Group, LLC.
159 NE SUM ST. Ste 4 #1110
Miami, Florida 33137 City/State and Zip Code
Millionaires lane only a grail. Com/deep seatrading group and E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Euronda J. E. lam-Barnettat (305) 457-9905 Name of Person Name of Person Name of Person Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$ \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,

Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

STREET/COURIER ADDRESS:

Certificate of Status &

Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Deep Seg Tradio (Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)	<u>, C</u>	
(A Florida Limited Lial	oility Company)		
The Articles of Organization for this Limited Liability Company we Florida document number 114000 19749	ere filed on $\frac{2/5/14}{}$	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	ty company here:		
The new name must be distinguishable and end with the words "Limited Liability	y Company," the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:	nlA		
(Principal office address MUST BE A STREET ADDRESS)		11 DIV	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter	SION OF THE SION O	
Name of New Registered Agent:	\cap/A		
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Coac	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office ac	erformance of my duties, and I am f ovided for in Chapter 605, F.S. Or,	familiar with and if this document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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 = M $AMBR = A$	lanager .uthorized Member		
Title MGL	Name TERRIAN Martin	Address 159 NE SYL 8t. Sucke 4# Mami, Florida 3313	Type of Action Add Remove
			□ Add □ Remove
			□ Add □ Remove
			DIVISION OF CHICAGO
			□ Add
			□ Remove

D. It amending any other intormation, enter change(s) here. (Attach daumonal sheets, if necessary.)
ADD EIN-46-4653518
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)
Ewsonds J. Elam-Barnet
Signature of Thember or authorized representative of a member Euronda J. Elom - Barnett
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00