Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To :

Division of Corporations

Fax Number : (850)617-6383

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

: (561)694-8107 Phone

Fax Number

: (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLOUD TRADING, LLC

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08/31/2015 11:34 5612968430

ARTICLES OF AMENDMENT 115 AUG 31 AN 8: 29 TO ARTICLES OF ORGANIZATION AND ASSEED FLORIDA OF

CLOUD TRADING, LLC		
(Name of the Limited Liability Come (A Florida Limited	any sa it now appears on our recor Liability Company)	(d.)
The Articles of Organization for this Limited Liability Compan Florida document number L14000049751	y were filed on 03/25/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	<u>bility company bere</u> :	
The new name must be distinguishable and contain the words 'Limited Liab	oility Company," the designation "LL	.C" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:	4474 Drayton Ln, Oviedo FL	. 32765
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	4474 Drayton Ln, Oviedo FL	. 32765
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		ds, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	થક
·	, I	Florida
	City	Zip Cade

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 titic, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	QUIROZ, JOSE LUIS	4474 Drayton Ln, Oviedo FL 32765	🗆 Add
			□ Remove
MGR GALVEZ, ALMA S	GALVEZ, ALMA S	4474 Drayton Ln, Oviedo FL 32765	
		[] Remove	
			■ Change
			□ Add
	•		☐ Remove
			Change
			D Add
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			Change
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			D Change

	2.6	2015
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. Effective date, if other than the date of filing:	nal)	29
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after f Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	iling.) Pursuant to 605.0207 (3 date will not be listed as th	i)(b) je
the record specifies a delayed effective date, but not an effective time, at 12:01 a.b). The 90th day after the record is filed.	.m. on the earlier of:	
Dated August 31st 2015		
Dated August 5.18t		
Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00