

L14 000158 387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

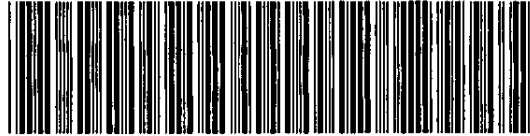
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 30 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AMERICAN STANDARD 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:

Juan D. Vera
Name of Person
AMERICAN STANDARD TRADING
Firm/Company
762 PINE CHASE COURT
Address
WELLINGTON, FL 33414
City/State and Zip Code
jdverajones@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan D. Vera at (954) 707-8931
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

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	LEO LI	555 WUYI ROAD	<input type="checkbox"/> Add
		APT 202	<input checked="" type="checkbox"/> Remove
		SHANGHAI, CHINA	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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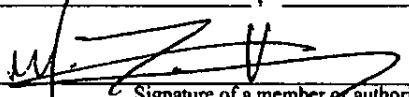
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

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)

Dated April 22nd 2015



Signature of a member or authorized representative of a member

Juan D. Vera

Typed or printed name of signee

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