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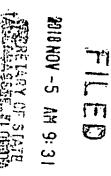
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: FX T	rading LLC	
Nan	ne of Ettimed Liability Company	
The enclosed Articles of Amendment and fee(s)) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
	Antony Itme	
	Antony Itme Name of Person FX Tading Firm/Company	
3720	South Ocean Blud Apt	301 B 80 T
— Hi	chland Beach FL, 3348- City/State and Zip Code hine 1892 @ hotmail. cor	(a) (a)
E-mail a	address: (to be used for future annual report notificat	ion) 99
For further information concerning this matter,	please call:	
Artony Hine Name of Person	at (<u>776)</u> 879 Area Code Daytime Te	O966
Enclosed is a check for the following amount:		
S25.00 Filing Fee ☐ \$30.00 Filing Fe Certificate of \$		□ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FX	Trading				_	
(Name of the Limited	A Florida Limited Li	y as it now appears on ou ability Company)	r records.)			
The Articles of Organization for this Limited Lia Florida document number <u>しょそりのい</u> 96		vere filed on 12/	30/2019	<u>≁</u> and :	assigned	
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liabil	ity company here:				
N						
The new name must be distinguishable and contain the wo	ras "Limitea Liabilit	y Company, The designati	on TLLC or the a	poreviation	T.,t.,C.	
Enter new principal offices address, if applica	ble:				,	
Principal office address MUST BE A STREET	ADDRESS)					
Enter new mailing address, if applicable:			· · · · · ·		2918 NC	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			12 N	V 5	3
				ing Tri	} 1	71
B. If amending the registered agent and/o registered agent and/or the new registered offi	r registered offi ice address here:	ice address on our	records, <u>enter</u>	the nan	는 <u>두</u>	e-new
Name of New Registered Agent:	Anto	1yJ Hine				
New Registered Office Address:	3720	Sat Ocen Enter Florida stree	Z Blud	,Apt	3011	3
	Highland	Beach	Florida _	3348 Zip Cod	<u>}</u>	

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>	Name	Address	Type of Action
			☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add 2
			Add Mill Remove And Add Mill Remove And Add Mill Remove And Add Mill Remove And Add Mill Add
			□ Remove
			Change
			
			☐ Remove
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			Add
			Remove

	
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Filing Fee: \$25.00