## 115000029010

(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	. MAIL
, (Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SCURE MARY OF STATE
ALLAHASSEE FINAN

JUN - 4 2015 T. BROWN

## COVER LETTER

10:	Division of Corpora		\$			
•	CT:	AI TRADIN	6 LLC			
		Name of Lim	ited Liability Company		_	
The enc	losed Articles of Ame	endment and fee(s) are sub-	mitted for filing.			
Please r	eturn all corresponder	nce concerning this matter	to the following:			
	-	ANUP	MA CI+ D ?	ORA		
			Name of Person			
		SAI	TRADING Firm/Company	LLC		
	-		Firm/Company			
	-	2460 Deer	creek Cour	ntry Chue	BUVB.	APT 308-A
	-	DEER FIEL	D BEACH  City/State and Zip Code	FL 334	42	
			RA @ 6 m A i do be used for future annual n			
For furt	her information conce	rning this matter, please ca	all:			
Cel	estino C	UB; 1/A	at (_57/)	699-767	9	
	Name of Per	son	Area Code	Daytime Telephone No	ımber	
Enclose	d is a check for the fo	llowing amount:				
\$25	.00 Filing Fee C	1 \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Cer osed) Cer	00 Filing Fee, tificate of Status & tified Copy itional 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

May 22, 2015

ANUPMA CHOPRA 2460 DEERDREEK COUNTRY CLUB BLVD APT 308-A DEERFIELD BEACH, FL 33442

SUBJECT: SAI TRADING LLC Ref. Number: L15000029010

We have received your document for SAI TRADING LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 915A00010882

SECRETARY OF STA

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

O.	£'	SA SUM SAID
		on our records.) SEC F SALE O
SAI TRADING  (Name of the Limited Liability Compar  (A Florida Limited L	nv os it naw annears	on our records ) SASA 20
(A Florida Limited L	iability Company)	Non records.
The Articles of Organization for this Limited Liability Company	were filed on	02 - 16 - 2015 and assigned
Florida document number <u>L 15000029010</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company her	:
•		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2460 1	Peercreek Country CLUB BLI 308-A ID BEACH, FL 33442
(Principal office address MUST BE A STREET ADDRESS)	APT	308-A
	DEERFIE	LD BEACH, FL 33442
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2460 APT DEER F	DEERCREEK COUNTY CLUB ( 308-A GLD BEACH, FL 33442
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on o	
Name of New Registered Agent:		
New Registered Office Address:		•
	Enter Florida	a street address
		, Florida
	City	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>	Address	Type of Action
			Add
			□ Remove
			Change
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Note: I	ve date, if other than the date of filing:
aocume	nt's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated _	MAY 15th, 2015.
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00