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COVER LETTER

TÓ: Registration S Division of Co			
cupuscus sland	Time Group, L.L.(3	
SOBJECHSIANG	Name of Lim	ited Liability Company	····
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all corresp	ondence concerning this matter	to the following:	
	William Saint	t James Name of Person	
		Firm/Company	
	_3.0.0_N New_Yo	ck_Ave#2853	
	Winter Park	C, FL 32789 City/State and Zip Code	
	wstjamesl@g	•	
		to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
William	SAint James	at (_407)451-45	315
Name	of Person		e Telephone Number
Enclosed is a check for t	the following amount:		
XX \$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)
Regisi Divisi	JNG ADDRESS: ration Section on of Corporations 30x 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	on
Tallahassee, FL 32314		2661 Executive Co	enter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Island Time Group	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
The Articles of Organization for this Limited Liability Compar	ny were filed on _February_17,_201 gnd assigned
Florida document number <u>L15000029333</u> .	
menter and a second	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
Tradezum_LLC	
The new name must be distinguishable and centain the words "Limited Lia	ability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	22
(Frincipal office address 9031 BE A STREET ADDRESS)	ä, ,
	
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
	F-2
B. If amending the registered agent and/or registered registered agent and/or the new registered office address had a second agent.	office address on our records, enter the name of the new
removed the same of the new regime red white must constitute the	<u> </u>
Name of New Registered Agent:	
Name of New Negistered Agent.	
New Registered Office Address:	Enter Florida street address
	ring Florida street daaress
	, Florida
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as heing filed to merely reflect a change in the registered offic company has been notified in writing of this change.	s provided for in Chapter 605, F.S. Or, if this document i $oldsymbol{i}_{i}$

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member Type of Action <u>Title</u> **Address** Name | □ Add ☐ Remove □ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove (☐ Change ↓ ¹ □ Remove ☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
•		-
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an effective lote: If the	ate, if other than the date of filing:	5.02 0 ted a .
	specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earling day after the record is filed.	er o
nted	January 12 . 2018.	
	- ham	1
_	Signature of a member or authorized representative of a member	2
	William Saint James Typed or printed name of signee	25.5

Page 3 of 3

Filing Fee: \$25.00