08/24/2018 15:

PAGE 01/04

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000248828 3)))



H180002488283ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

ľo;			
	Division of Co	porations	
	Fax Number	1 (850)617-6383	
non:			
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number		
	Phone	: (305)552-5973	
	Fax Number	: (305)675-5944	t
			· .
			-
**Ente	r the email addr	ess for this busin <mark>ess entity</mark> to be used for fu	ture
		ilings. Enter only one email address please.**	
	,		•
1	Email Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TRADER PLUS, LLC



Certificate of Status0Certified Copy0Page Count04Estimated Charge\$25.00

Electronic Filing Menu

Corporate Filing Menu

Hel

CLINE

AUG 27 7018

**EXAMINER** 

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trader Plus,LLC

(Name of the Limited Limitity Company as it now appears on our records.) (A Florida Limited Limited Limitity Company)

The Articles of Organization for this Limited Liability Company were filed on 07/29/2015 and assigned Florida document number L15000129200

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the des	ignation "I.LC" or the abbreviation "L.L.C."	—
Enter new principal offices address, if applicable:		
(Principal office uddress MUST BE A STREET ADDRESS)	77*	
	65	
	······································	-
Enter new mailing address, if applicable:	37	
Mailing address MAY BE A POST OFFICE BOX;	AY BE A POST OFFICE BOX:	
	<u> </u>	

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Law Florida street addr	161 1
		lorida Zıp Coda

#### 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, Stanature of New Registered Agent

Page 1 of 3



• • •

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
AMBR	Adelina Diaz Mendez	10505 NW 112 Ave, Ste 8, Miami FL 33178	
<u></u>			D Add
			Reinove
			Change
AMBR	Miguel Fernandez	10505 NW 112 Ave. Ste 8. Miami FL 33178	
			Q Rymove
			□Ēh:mge ∽ N
	;		
			Remove
			el cr El cr D'Change
			_
			Add
			Remove
			C Change
			bbA 🗆
			C Remove
			Chonge
<u> </u>		<u> </u>	🖸 Add
			🗌 Ranove
			Change

# H18000248828

. .

·	 ·		
······	 		
······································	 		
	 <u></u>		
			EP.
	 · •		
	 	2	<u> </u>
	 	, s	ლი ჩა.
			<u>.</u>
	 		÷
*** ** ********************************	 	ŧ.	
		0 جا:	 ح
	 	<b>:-</b>	_ <del></del>
·····	 		<u></u>
······································	 	<u> </u>	
······································	 ·····		<u>-</u>
five date, if other than the date of Illing:	 (optio	nal) ·	

D. If amending any other information, enter change(s) here: (Attack additional shorts if necessary)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed,  $-\infty$ 

08/23/2018	$\sim 10$
	121
	Signature of a momber or authorized regresentative of a momber
Roger Freites	
	Typed or printed aunie of signee

Page 3 of 3 Filing Fee: \$25.00

H18000248828