## L 600030985

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Pertified Copies Certificates of Status  Special Instructions to Filing Officer:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Pertified Copies Certificates of Status	(Requestor's Name)
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## **COVER LETTER**

10.	Division of Corporations		,	
SUBJE	· –	P TRADING L	JSA LLC	
300,12	Name of	f Limited Liabili	ty Company	<del></del>
The end	closed Articles of Organization and fee(	s) are submitted	for filing.	
Please	return all correspondence concerning the	is matter to the fo	ollowing:	
		DANIEL NE	ENKOV	•
		Name of	Person	
		TOP TRADING	USA LLC	
		Firm/Cor	npany	
	3300 PORT ROYALE DRIVE	N.,#338		
		Addre	ess	
	FORT LAUDERDALE, FLORID	OA 33308		
	LANVUONG08@GMAIL.COM	City/State and	d Zip Code	
	E-mail address: (to be	used for future a	nnual report notification	on)
For furth	ner information concerning this matter, p	olease call:		*
	DANIEL NENKOV	954 at (	918-8 <b>53</b> 5	
	Name of Person	Area Code	Daytime Telephone	Number
Enclos	ed is a check for the following amount:			
<b>]</b> \$125.0	00 Filing Fee \$130.00 Filing Fee Certificate of Statu	ıs LlCertifi	0 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	r Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
TOP TRADING USA LLC (Must end with the words "Limited Liab	ility Company	, "L.L.C.," or "LLC.")
		,
<b>ARTICLE II - Address:</b> The mailing address and street address of the principal office	of the Limited	Liability Company is:
Principal Office Address:		Mailing Address:
3300 PORT ROYALE DRIVE N., # 338 FORT LAUDRDALE, FLORIDA 33308		0 PORT ROYALE DRIVE N., # 338 RT LAUDRDALE, FLORIDA 33308
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registration business entity with an active Florida registration.)  The name and the Florida street address of the registered agent	stered Agent.	
DANIEL NENKOV		
Na	me	·
3300 PORT ROYALE D	DRIVE N., #3	38
Florida street address (P.	Э. Вох <u><b>NOT</b></u> в	cceptable)
FORT LAUDERDALE	FLORIDA	33308
City	State	Zip
Having been named as registered agent and to accept service of place designated in this certificate, I hereby accept the appointn		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

16 JAP 29

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<u> Pitle:</u>	Name and Address:
AMBR" = Authorized Member	
'MGR" = Manager MGR	DANIEL NENKOV
wigh	PORT ROYALE DRIVE N., #338
	FORT LAUDERDALE, FLORIDA 33308
<del></del>	
EV: Effective date, if other than	the date of filing:
EV: Effective date, if other than ctive date is listed, the date must filling.) the date inserted in this block d	est be specific and cannot be more than five business days prior to or 90 per not meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than ective date is listed, the date must filling.) the date inserted in this block diment's effective date on the Dep EVI: Other provisions, if any.	est be specific and cannot be more than five business days prior to or 90 per not meet the applicable statutory filing requirements, this date will not artment of State's records.
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EV: Effective date, if other than active date is listed, the date must filling.) the date inserted in this block diment's effective date on the Dep EVI: Other provisions, if any. DALL LAWFUL BUSINESS REQUIRED SIGNATURE:  Signatur This document	pes not meet the applicable statutory filing requirements, this date will not artment of State's records.  The of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
EV: Effective date, if other than active date is listed, the date must filling.) the date inserted in this block diment's effective date on the Dep EVI: Other provisions, if any. ID ALL LAWFUL BUSINESS REQUIRED SIGNATURE:  Signatur This document I am aware that	pes not meet the applicable statutory filing requirements, this date will not artment of State's records.  The of a member or an authorized representative of a member. The executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State.
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)