LI 600054665

(Address) (Address) (City/State/Zip/Phone #)
(Address)
(Address)
· · · · · ·
· · · · · ·
· · · · · ·
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiliess Ellity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700291815457

10/18/18--01038--001 **25.00





October 3, 2018

DIANA Y BAQUERO 17180 ROYAL PALM BLVD SUITE 3 WESTON, FL 33326

SUBJECT: WINMARK TRADE LLC

Ref. Number: L16000054665

We have received your document for WINMARK TRADE 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Dionne M Scott Regulatory Specialist II

Letter Number: 218A00020580

RECEIVED OCT 1.5 2018

COVER LETTER

TO: Registration So Division of Co					
	K TRADE LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	DIANA Y BAQUERO			;	١.
Division of Corporations WINMARK TRADE LLC Name of Limited Liability Company he enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: DIANA Y BAQUERO Name of Person Firm/Company 17180 ROYAL PALM BLVD SUITE 3 Address WESTON/FL 33326 City/State and Zip Code diana760@hotmail.com E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: Diana Baquero 954 Area Code Daytime Telephone Numb nelosed is a check for the following amount: if \$25.00 Filing Fee Certificate of Status Certificate Copy (additional copy is enclosed)			-1		
		Firm/Company		2	•
	17180 ROYAL PALM BI	LVD SUITE 3		. 5	
	WESTON/FL 33326	Address			
	diana760@hotmail.com	City/State and Zip Code			
			lication)		
For further information of	oncerning this matter, please c	all:			
Diana Baquero					
Name c	of Person	Area Code Daytimo	e Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee		Certified Copy	Certified C	of Status &	

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

WINMARK TRADE LLC		
(Name of the Limited Li (A Flo	ability Company as it now appears on our records. orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili		and assigned
lorida document number L16000054665	·	
his amendment is submitted to amend the following		
. If amending name, enter the new name of the	limited liability company here:	
ne new name must be distinguishable and contain the words.		<u>, , , , , , , , , , , , , , , , , , , </u>
e new name must be distinguishable and contain the words.	"Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AL	ODRESS)	<u> </u>
		> :.1
		. 7
nter new mailing address, if applicable:		
Mailing address <u>MAY BE A POST OFFICE BOX</u>	1	
Tuning unaress MAT BE A 1031 OF THE BOX		
. If amending the registered agent and/or registered agent and/or the new registered office :		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	Ciţy	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>	<u>Address</u>	Type of Action
AMBR	JAIRO Y HILLON	7950 NW 53 RD ST SUITE 735 337	
		MIAMI / FL 33166	
			Change
AMBR	JAIRO Y HILLON	17180 ROYAL PALM BLVD SUITE 3	_ = Add
		WESTON FL 33326	
			Remove
			Change
AMBR	DIANA Y BAQUERO	7950 NW 53 RD ST SUITE 735 337	Add ·
		MIAMI / FL 33166	Remove
		Change	
AMBR	DIANA Y BAQUERO	17180 ROYAL PALM BLVD SUITE 3	■ Add
<u> </u>		WESTON FL 33326	
			☐ Remove
			☐ Change
			□ Add
			Remove
			Change
			Add
			☐ Remove
			☐ Change

	_					
		. .				_
						_
		,				
	<u>-</u>					
	, 					
						
	 • -					;
					1	·
					`>	: ! 1
					=' =================================	
		-				
.						
						
fective date, if other than in effective date is listed, the date ote: If the date inserted in the cument's effective date on the	iis block does r	not meet the appli	or to date of filing of cable statutory fi	(o) more than 90 days a ling requirements,	otional) fter filing.) Pursuant to this date will not be	605.0207 listed as t
record specifies a dela The 90th day after the			ot an effective	e time, at 12:0	1 a.m. on the ea	rlier of
SEP 17		2018				
	Jeen 4	hich Bazue	- 0 foze)	ive of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00