# 116000158319

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## **COVER LETTER**

Division of Corporations
SUBJECT: TRADEPOU Vantures LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Piyush Rampuzia
TRADEPOY Ventures LLC Firm/Company
1001 Brickoll Bay Dr. #2700
Miami, FL 33131 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert Solines at (786) 338 - 9000 = 7
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$

### MAILING ADDRESS:

TO:

**Registration Section** 

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

_ leadepay Ventures []	
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>LI600158319</u> .	were filed on <u>08-23-16</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1001 Brickell Bay Dr.
(Principal office address MUST BE A STREET ADDRESS)	#2700
	Miani , FL 33131
Enter new mailing address, if applicable:	1001 Brickell Boy Dr.
(Mailing address MAY BE A POST OFFICE BOX)	#2700
	Miami, FL 33131
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
registered agent and/or the new registered office address here	<u>e</u>
Name of New Registered Agent:	A.S. 201
New Registered Office Address:	And A
	Enter Florida street address CA 27 1
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I benefit a seguited in 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
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i seine	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	ive date, if other than the date of filing:(optional)
	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	ent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
e red The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the 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.
ated	September 30, 2016.
	Signapare of a member or authorized representative of a member
	Typed or printed name of signee

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Filing Fee: \$25.00