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SECRE LARY OF SAME DIVISION OF CORPORATION

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COVER LETTÉR

South West	Trading International LLC		
	-		
	Name of Lim	ited Liability Company	
i all correspon	dence concerning this matter	to the following:	
	Evelyn Paucar		
	- Miles	Name of Person	
	South West Trading Intern		
•		Firm/Company	
	351 Cedarcrest Ct		
	_	Address	
	Lake Mary, FL 32746		
		City/State and Zip Code	, <u> </u>
	_	to be used for future annual report notifi	cation)
itormation co	ncerning this matter, please ca	all:	
car		407 884-6400	
Name of	Person	Area Code Daytime	Telephone Number
check for the	following amount:		
iling 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)
	ntormation co rar Name of	Articles of Amendment and fee(s) are substantial correspondence concerning this matter Evelyn Paucar	Name of Person

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

South West Trading International				
(Name of the Lin	nited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)		
The Articles of Organization for this Limited	Liability Company were filed	on 12/05/2016	and assigned	
Florida document number L16000221722	···································			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liability compa	nny here:		
The new name must be distinguishable and contain the	words "Limited Liability Company.	"the designation "LLC" or the	e abbreviation "L.L.C."	
Enter new principal offices address, if appl	icable:		· · · ·	<u>.</u>
(Principal office address MUST BE A STRE	ET ADDRESS)	 	∞ :	25.5
			Z	يخ: ت≕ر∵
Enter new mailing address, if applicable:				<u>ب</u> ت بز
Mailing address MAY BE A POST OFFICE	<u> </u>		=	<u> </u>
				<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			er the name of the	<u>e ne</u>
	1655 E Semoran Blvd Suite	. 18		_
New Registered Office Address:		er Florida street address		_
	Apopka	, Florida	32703	
	City	,	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Juan Andres Eduardo Montenegro	351 Cedarcrest Ct. Lake Mary, FL.	= Add
			□ Remove
			Change
			Add
			□ Remove
			□ Change
		,	Add
		 	Remove
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(If an eff Note:	ive date, if other than the date of filing:	
	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlies 90 th day after the record is filed.	r of:
	ni la la cui	
Dated	- 06/12/2018;	

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