## 116000222300

(Requestor's Name)	İ
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PICK-UP WAIT	MAIL
(Business Entity Name)	<u> </u>
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## **COVER LETTER**

TO:	Registration Sectorial Division of Corp		
SUBJE	·CT·		Brand Line Traders, LLC
301312		Name o	of Limited Liability Company
The end	closed Articles of A	mendment and fee(s) ar	re submitted for filing.
Please 1	return all correspon	dence concerning this n	natter to the following:
			Kris Balkan
		1	Name of Person
			Firm/Company
			724 2nd Street SE
			Address
			Largo, Florida 33771
			City/State and Zip Code
			kris@brandlinetraders.com
		E-mail addr	ress: (to be used for future annual report notification)
For furt	her information con	cerning this matter, plea	ase calt:
Kris Balkan			727 333-5432
	Name of F	Person	Area Code Daytime Telephone Number
Enclose	d is a check for the	following amount:	
\$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Statu	
MAILING ADDRESS:			STREET/COURIER ADDRESS:
		ion Section of Corporations	Registration Section Division of Corporations
	P.O. Box	6327	Clifton Building
	Tallahass	ee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brand Line Traders LLC (Name of the Limited Liability Company as it now appears on our records.)
|| (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_12-16-2016 and assigned L16000222300 Florida document number 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 designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address Florida City 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.

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending or removed	g Authorized Person(s) authori from our records:	zed to man	age, enter the title, name, and address o	f each person being added
MGR = M AMBR = A	lanager authorized Member			
<u>Title</u>	<u>Name</u>		Address	Type of Action
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