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DIVISION OF CORPORATIONS

O SIMMONS JUN 2 9 2017

COVER LETTER

TO: Registration Section Division of Corpo		f.*	
SUBJECT:	Zeet Trading	,	
	Name of Line	fied Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Alexan	der Barlow	
		Name of Person	
		Firm/Company	
	601 NW	82nd Avenue, AP	rT #326_
	Plantation	, FL 33324	
	alexible E-mail address: (1	City/State and Zip Code Oarlow @ gmail. Controbe used for future annual report notifi	n cation)
For further information con	cerning this matter, please ca		
Alexander	Barlow	at (954) 684- (Area Code Daytime	6222
Name of P	erson	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing 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)

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

<u>Z</u> e	eet Trading LLC	
(Name of the Limited (A	Liability Company as it now appears on c Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L1700063</u> 2	• •	20 2017 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
EA Capital L	LC	€
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	SION
(Principal office address MUST BE A STREET A	ADDRESS)	9 B H
Enter new mailing address, if applicable:		26 AM B: 42 or compositions
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic	•	records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida sti	reet address
		, Florida
•	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, 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	
			Add	
			□ Remove	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
···	
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CC AN I	ED
SION OF CORFGRATIONS	
C. Effective date, if other than the date of filing: (If an effective 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 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records.	(3)(b) he
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: b) The 90th day after the record is filed.	
Dated <u>June 19</u> , 2017.	
Signature of a member or authorized representative of a member	
Alexander Barlow Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00