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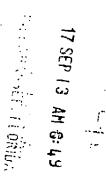
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Sect Division of Corpo			·
SUBJECT: Brecher Ti	ading, LLC.		
	Name of Limi	ted Liability Company	
	mendment and fee(s) are sub-	_	
	Athena Beth Breche		
		Name of Person	
	Brecher Trading, LL		
		Firm/Company	
	118 Andros Harbo	Brecher Name of Person ling, LLC. Firm/Company Harbour Pl Address 88 City/State and Zip Code com address: (to be used for future annual report notification) please call: at (678) 525-8086 Area Code Daytime Telephone Number ce & \$\$55.00 Filing Fee & \$\$60.00 Filing Fee.	
		Address	
	Jupiter, Fl. 33458		
		City/State and Zip Code	
	beth1929@aol.com E-mail address: ()	o be used for future annual report notific	cation)
For further information con	cerning this matter, please ca	·	
Athena Beth Breche	r	at (678) 525-8086	
Name of F	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	Certified Copy	Certificate of Status & Certified Copy

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

Brecher Trading, LLC.		
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our recored Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Comparition document number L17000142643	any were filed on 07/03/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "L.L.	C" 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) 3. If amending the registered agent and/or registered		ds, enter the name of the
egistered agent and/or the new registered office address b	<u>nere</u> :	8 49 T
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	255
,	, F	lorida 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
AMBR	Christopher Jay Brecher	118 Andros Harbour PI, Jupiter, FI 33	3458 2 Add
			☐ Remove
			Change
AMBR	Athena Beth Brecher		Add
			Remove
		118 Andros Harbour Pl, Jupiter, Fl 3	3458 Change
			O Add
			Remove
			Change Schange Addit Regrove
			Change
		Remove	
			☐ Change
			Add
			Remove
			☐ Change

am changing Athena Beth Brecher from Manager to a member and add	ng Christopher Jay Brech	er as a m	ember.

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ve date, if other than the date of filing:	(optiona	ıl)	
ective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory f			
ent's effective date on the Department of State's records.	8		
ord specifies a delayed effective date, but not an effective	e time, at 12:01 a.m	n. on the	e earli
90th day after the record is filed.			
September 2ND 2017			
TYUNE THE COLD			
Signature of a member or authorized representa			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00