

L17000150716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

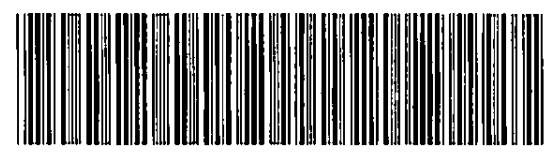
(Business Entity Name)

(Document Number)

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October 5, 2017

Florida Department of State
Division of Corporation
Attn: Registration Section
P.O. Box 6327
Tallahassee, Florida 32314


Re: IC FINAUR TRADING, LLC – Articles of Amendment
Our File No. 2535-75

Dear Sir or Madam:

Enclosed please find the original and a copy of the Cover Letter and Articles of Amendment for IC FINAUR TRADING, LLC, changing the name of the entity to IC FINAUR, LLC. Also enclosed is a check payable to Department of State in the amount of \$30.00 which includes your fee of \$25.00 and \$5.00 for a Certificate of Status. Please stamp the copy with the date of filing and return it with the Certificate of Status.

Should you have any questions or problems regarding this request, please do not hesitate to contact our office.

Cordially yours,


ALLAN M. GLASER

AMG/sr

Enc.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

IC FINAUR TRADING, 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 JULY 13, 2017 and assigned Florida document number L17000150716.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IC FINAUR, LLC

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:

SAME

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME

(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:

SAME

New Registered Office Address:

Enter Florida street 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>	<u>Address</u>	<u>Type of Action</u>
_____	SAME	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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