117000232702

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nai	me)
(Do	ocument Number)	
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COVER LETTER

TO:			,	
eup u			•	
SUBJI	EC1:		ited Liability Company	<u> </u>
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy			
			Name of Person	
		A1 INTERNATIONAL B	USINESS CORP	
			Firm/Company	
		8388 NW 68TH ST		
			Address	
		MIAMI FL 33166		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	ation)
For fur	ther information co	oncerning this matter, please ca	all:	
MIGU	IEL A. RODRIGUE	EZ		
Name of Person Area Code Daytime Telepho			Celephone Number	
Enclos	sed is a check for th	e following amount:		
■ \$2	5.00 Filing Fee		Certified Copy	Certificate of Status &

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**

E) 2017 DEC _	LED
ALLAHASSE	PN 2: 05 FOF STATE E. FLORIDA

AQUILES TRADING LLC

(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) lability Company)	TEAHASSEE. FLORIDA
The Articles of Organization for this Limited Liability Company Florida document number L17000232702	were filed on NOV 09TH, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity 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 off registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
Nam Banistan J. Annual St. Later 1971	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

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ffective date, if other that	the date of fil	ling:		(optional)	
an effective date is listed, the dat lote: If the date inserted in the	e must be specific his block does no	and cannot be prior to do t meet the applicable	ate of filing or more than statutory filing require	90 days after filing.) Purements, this date will	rsuant to 605.0207 I not be listed as
ocument's effective date on t	he Department of	of State's records.	, , ,		
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e record specifies a del The 90th day after the			n errective time, a	it 12:01 a.m. on	the earlier o
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nated NOV 30TH					
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Filing Fee: \$25.00