L18000067871

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only

1092.6209.



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03/25/19--01019--009 **25.00

2019 APR 25 PM 6: 48

C. GOLDEN APR 25 2019

COVER LETTER

TO:

TO:	Registration Se Division of Cor			
SUBJEC	CT: Morocco	bridge for trading and inve	stment	
			ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Youssef Ksibi		
			Name of Person	
		Morocco bridge for tra	ading and investment	
			Firm/Company	
		14035 Kestrel Dr		
		4	Address	
		Orlando Fl 32837	- 1-	
			City/State and Zip Code	
		ksibi.youssef@outlook.co	m to be used for future annual report not	ification)
For furth	ier information c	oncerning this matter, please ca	•	,
Yousse	ef Ksibi		_{at (} 407 ₎ 722 9365	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for t	ne 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)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301



April 3, 2019

YOUSSEF KSIBI 14035 KESTREL DRIVE ORLANDO, FL 32837

SUBJECT: MOROCCO BRIDGE FOR TRADING AND INVESTMENT, LLC

Ref. Number: L18000067871

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Cr

Letter Number: 619A00006669

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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MOROCCO BRIDGE FOR TRADING AND INVESTMENT, 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 L Florida document number <u>L18000067871</u>	iability Company were filed on $\frac{0}{2}$	3/15/2018 and assigned
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company l	<u>ere</u> :
The new name must be distinguishable and contain the v	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
B. If amending the registered agent and registered agent and/or the new registered o		n our records, enter the name of the new
Name of New Registered Agent:	Registered Agents Inc.	
New Registered Office Address:	7901 4th St N STE 300	
	Enter Flo St. Petersburg	rida street address , Florida <u>33702</u>
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

Title	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			Add
			□ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			□ Remove
			Change
			Remove
			Change
		<u> </u>	□ Remove
			☐ Change

•	
•	
	<u></u>
(If an el <u>Note:</u>	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
	March 20th 2019
Dated	
Dated	100 b
Dated	Signature of a member or authorized represent rive of a member

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Filing Fee: \$25.00