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COVER LETTER

TO:	Registration Se Division of Cor				
SUBJ		ION TRADING LLC			
SUBJ	ECI:	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub			
ricasc	return an correspo	JOHN MARSHALL	to the tonowing.		
		INNOVATIVE TRADING	Name of Person G LLC		
		650 N. Alafaya Trail #101	Firm/Company - 780907		20 20 100 100 100 100 100 100 100 100 10
		Orlando, FL 32828-7638	Address		1 1
		buildingsupplies@cfl.rr.com		fication)	ک ر ښ . س
For fu	rther information c	r-mail address: (to be used for future annual report noticall:	neation)	. <u> </u>
AHOL	MARSHALL		407 C)5	1-6226	
	Name o	f Person	Area Code Daytim	e Telephone Number	_
Enclos	sed is a check for th	he following amount:			
□ \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing for Certificate of Certified Copy (additional copy)	Status & v
	3				

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

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our reco Liability Company)	ords.)		
he Articles of Organization for this Limited Liability Company	were filed on 09/17/2018		and a	ssigned
orida document number L18000220115				
nis amendment is submitted to amend the following:				
_				
. If amending name, enter the new name of the limited liab	oility company here:			
NOVATIVE TRADING LLC				
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	.LC" or the abbr	eviation "	L.L.C."
nter new principal offices address, if applicable:	NOT APPLICABLE			
Principal office address MUST BE A STREET ADDRESS)	~ 	17.	231	
incipal office address (1001 bis 1101 Nins 1 1100 Nins)				1.1
			1	
	NOT APPLICABLE		່ວ່າ	
nter new mailing address, if applicable:	NOT ATTECABLE		\rightarrow	- ()
<u> 1 Aailing address MAY BE A POST OFFICE BOX</u>			1.1	
		7.5	w	
		3		
. If amending the registered agent and/or registered o	ffice address on our reco	rds, enter tl	ie name	e of the
gistered agent and/or the new registered office address her	<u>·e</u> :	· · · · · ·		
Name of New Registered Agent: NOT APPLICA	ABLE			
			•	
New Registered Office Address:	Enter Florida street ada	de co		
	Emer Fioriaa sireet aaa	41 5 55		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
	NOT APPLICABLE		PT A LI
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Effect	e date, if other than the date of filing:	(optional)		
(If an eff	ctive date is listed, the date must be specific and cannot be prior to date of filing or more f the date inserted in this block does not meet the applicable statutory filing re	than 90 days after filing.)		
	nt's effective date on the Department of State's records.	equirements, and date v	viii not be n	13100 03 0
. •				
	ord specifies a delayed effective date, but not an effective tim 90th day after the record is filed.	ie, at 12:01 a.m. c	in the ear	rlier of:
Dated	24-APSI 2019 Signature of a member or authorized representative of			
	Signature of a member or authorized representative of			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00