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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ASSURED ACCOUNTING AND TAX SERVICES

Account Number : I20180000048 Phone : (954)793-0353 : (954)944-3163 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ADM & EURASIA. TRD. BR

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EURASIA TRADING AND SERVICES LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EURASIA TRADING AND SERVICES LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it new appearability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	10/23/2018	and assigned
Florida document number <u>L18000248668</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company b	ere:	_
	• -	•	ers wayen
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the	designation "LLC" or the a	abbreviation "Lau"
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			<u>-</u>
Enter new malling address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	Nce address or	1 our records, <u>enter</u>	the name of the nev
New Registered Office Address:			
THE WILLEST CONTROL FIGURES.	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 agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of provided for in (my duties, and I am Thapter 605, F.S. Or	familiar with and ; if this document is

It 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	Name	Address	Type of Action
MGRM	BELLA CLERMANN	7429 NW 48TH ST	⊠ Add
		MIAMI, FL 33166	Remove
			☐ Change
			Remove
			ن آ Change الم
			ر bbi
			□ Remove
			☐ Change
			☐ Aðd
	•		☐ Remove
			Cl Change
		□ Rcmove	
		 	Change
			□ Remove
			☐ Change

Dated OCTOBER 30 2018

Signature of a member of authorized representative of a member SELMO CLERMANN

Typed or printed name of signec