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MAY - 2019

T. LEMIEUX

COVER LETTER

TO:	Registration Se Division of Cor			4
SUBJE		DE INVESMENT LLC		
30001		Name of Lim	ited Liability Company	
The en	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		OMARYS MONDEJAR		
			Name of Person	
		REAL TRADE INVESME	ENT LLC	
			Firm/Company	
		13821 SW 9 TH ST		
			Address	
		MIAMI FL. 33184		•
			City/State and Zip Code	<u></u>
		OMYLEE66@GMAIL.CO		
For fur	ther information co	e-mail address: (oncerning this matter, please co	to be used for future annual report not all:	necation)
OMA	RYS MONDĘJAR		786 641 9740 at ()	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclos	ed is a check for th	ne following amount:		
₽ \$2	5.00 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)

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**

REAL TRADE INVESMENT LLC

(Name of the Limited Liability Company as it now appears of our (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	MAI	STORETARY OF SING	
The Articles of Organization for this Limited Liability Compar	ny were filed on WAF	RX27/2019.532.E.F. Edition and assigned	
Florida document number L19000085145			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the desi	ignation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		4	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		our records, enter the name of the ne	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	la street address	
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agen	nt:		
I hereby accept the appointment as registered agent and a	gree to act in this ca	pacity. I further agree to comply with th	

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>	Type of Action
MGR	OMARYS MONDEJAR	13821 SW 9 TH ST MIAMI FL. 33184	Add
		 	□ Remove
			□ Change
AMBR	OMARYS MONDEJAR	13821 SW 9 TH ST MIAMI FL.33184	
			Remove
			Change
			Remove
		<u></u>	□ Change
		·	Add
		···	Remove
			Change
			□ Remove
			Change
·			Add
			☐ Remove
			Change

THE EIN NUMBER FOR T	HE COMPANY IS: 83 4347449		
			
		<u>,, , , , , , , , , , , , , , , , , , ,</u>	
 			
 	<u> </u>		
			
			
			
Tective date if other than the	date of filing:	(ontional)	
on effective date is listed, the date mustote: If the date inserted in this blookument's effective date on the Decument	ock does not meet the applicable statt	(optional) filing or more than 90 days after filing.) Pursuan story filing requirements, this date will not	t to 605. be liste
e record specifies a delayed The 90th day after the reco		ective time, at 12:01 a.m. on the	earlie
ated	2019) .	
	Signature of a member or authorized rep		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00