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L19000 E	9714
(Requestor's Name)	
(Address)	900328431479
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name) (Document Number)	05/13/19 −01018-−032 **60.00
Certified Copies Certificates of Status	
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	C. GOLDEN May 2 9 2019

COVER LETTER

		CO	VER LETTER	
TO:	Registration Sect Division of Corp	ion prations		
		450 Kneale LLC		
SUBJE	CT:	Name of Limited I	iability Company	
The en-	closed Articles of A	mendment and fee(s) are submitte	d for filing.	
Please	return all correspon	dence concerning this matter to th	e following:	
		Lynn Chiota		
			Name of Person	
		IBG LLC		
			Firm/Company	
		I Pickwick Plaza		
			Address	
		Greenwich, CT		
			ity/State and Zip Code	
		lehiota@interactivebrokers.com	i psed for future annual report notification	<u>, (n</u>
For fu	rther information co	oncerning this matter, please call:		
Lynn	Chiota		203 618-5507	
	Name of	Person	Area Code Daytime Tel	ephone Number
Enclo	sed is a check for th	e following amount:		
□ S:	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)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassee, FL 32314		STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

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	S OF AMENDMENT TO OF ORGANIZATION OF	FILED 2019 MAY 13 AM 7: 4
450 Kneale LLC (<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	U. 314
The Articles of Organization for this Limited Liability Co Florida document number <u>L19000089714</u>	ompany were filed on <u>April 1, 2019</u>	and assigned
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limi</u>	ted liability company here:	
The new name must be distinguishable and contain the words "Limi Enter new principal offices address, if applicable:	ed I iability Company," the designation "LEC" or the	e abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>		
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		<u>er the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address.	Enter Florida street address	
	Florida	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. Thereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 4 34.

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AMBR =	Authorized	Member

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<u>Title</u>	Name	Address	Type of Action
MGR	William Peterffy	777 S. Flagler Drive, Suite 1001 West Palm Beach, FL 33401	🗅 Add
			🔄 🗐 Remove
			Change
MGR Christopher Uzpen	Christopher Uzpen	777 S. Flagler Drive, Suite 1001 West Palm Beach, FL 33401	🗆 Add
		🗆 Remove	
		🖬 Change	
			Add
		C Remove	
	·	Change	
			🗆 Add
	· · · · · · · · · · · · · · · · · · ·	Remove	
			Change
			Add
			Remove
			Change
			Add
		Remove	
			Change

D. If amending any other information, enter change(\$) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _

(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's repords.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Signature / a member or authorized representative of a member Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00