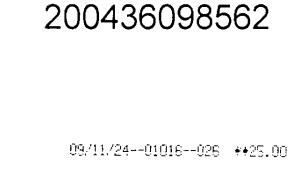
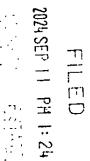
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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| J. HOD. |
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Office Use Only





COVER LETTER

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Tallahassee, FL 32314

| | tration Sec on of Corp | | | |
|------------------|---------------------------|---|--|--|
| B SUBJECT: _ | ertco Tradi | ng LLC | | |
| SUBJECT: _ | | Name of Lim | ited Liability Company | · · · · · · · · · · · · · · · · · · · |
| The enclosed A | Articles of A | amendment and fee(s) are sub | mitted for filing. | |
| | | dence concerning this matter | - | |
| | | Bert Cohen | | |
| | | | Name of Person | - |
| | | Bertco Trading LLC | | |
| | | | Firm/Company | |
| | | 9801 Collins Ave STE 12L | - | |
| | | | Address | |
| | | Bal Harbour, FL 33154 | | |
| | | · · · · · · · · · · · · · · · · · · · | City/State and Zip Code | |
| | | mrbertcohen@gmail.com | | |
| For Coal C | | · | to be used for future annual report n | otification) |
| For further info | rmation co | ncerning this matter, please ca | all: | |
| Bert Cohen | | | (416) 566-6056 at () | |
| · | Name of | Person | | ime Telephone Number |
| Enclosed is a cl | heck for the | : following amount: | | |
| ■ \$25.00 Fili | ing Fee | S30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Sectificate of Status & Certified Copy (additional copy is enclosed) |
| | ng Address | | Street Address: | |
| | stration Se | ection orporations | Registration S Division of C | |
| | Box 6327 | | The Centre of | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

| ART | TO FICLES OF OI OF | RGANIZATION | TOS.) |
|--|---|---|-----------------------------------|
| Bertco Trading LLC | | | Py |
| (Name of the Lim | ited Liability Compan (A Florida Limited Lia | v as it now appears on our reco ability Company) | <u>ros.</u>) |
| The Articles of Organization for this Limited l Florida document number L19000106150 | Liability Company v | vere filed on Apr 25, 2019 | and assigned |
| This amendment is submitted to amend the fol | llowing: | | |
| A. If amending name, enter the new name | of the limited liabil | ity company here: | |
| The new name must be distinguishable and contain the Enter new principal offices address, if applia (Principal office address MUST BE A STRE | icable: | y Company," the designation "LI | .C" or the abbreviation "L.L.C." |
| Enter new mailing address, if applicable: | | · | |
| (Mailing address MAY BE A POST OFFICE | E BOX) | | |
| B. If amending the registered agent and/or agent and/or the new registered office addr | | ldress on our records, <u>ent</u> e | er the name of the new registered |
| Name of New Registered Agent: | Bert Cohen | | |
| New Registered Office Address: | 9801 Collins Ave | STE 12L Enter Florida street adds | necc. |
| | Bal Harbour | | 22154 |
| | | City , 1 | Florida 33134 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, 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> | Name | Address | Type of Action |
|--------------|-------------|---------------|----------------|
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| <u>lote:</u> If | date, if other than the date is listed, the date in this lite date in this lite effective date on the lite date on the lite date. | block does not n | neet the applica | o date of filing or n ble statutory filir | optio fore than 90 days after g requirements, this | nal) filing.) Pursuant to 605.020 date will not be listed a |
| record s | pecifies a delayed effect | ive date, but not | an effective tin | ne, at 12:01 a.m. | on the earlier of: (b) | The 90th day after the |
| ated | /06/2024 | | 1:21 | _· | | |
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| | | 150% | 10/1 | | | |
| | | Signature of a r | nember or author | rized representative | of a member | |

Filing Fee: \$25.00