

L19000113204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

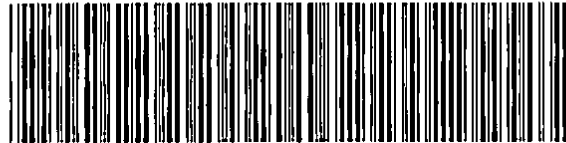
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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19 AUG 13 PM 3:47

SECRETARY OF STATE
CALLAHAN/ASSESSOR FLORIDA
2819 AUG 13 PM 4:52

AUG 13 2019
C. W. ...

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Chao Cargo Lines LLC
Name of Limited Liability Company

2009 AUG 13 PM 4:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jean Ng Duarte
Name of Person

Chao Cargo Lines LLC
Firm/Company

4624 NW 114th Ave, Apt 907
Address

Doral, FL, 33178
City/State and Zip Code

ChaoCargoLines@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jean Ng Duarte at (224) 410-6538
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$50.00 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

Chao Cargo Lines LLC

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

REC'D AUG 13 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FL 32310

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L19000113204

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Jean Chao Monetary Fx Alliance LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

4624 NW 114th Ave, Apt 907

(Principal office address MUST BE A STREET ADDRESS)

Doral, FL 33178

Enter new mailing address, if applicable:

Same

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the n
registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jean Ng Duarte	4624 NW 114th Ave. Apt 907 Doral, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
President	Vielka A Quezada	4624 NW 114th Ave, Apt 907 Doral, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
Managing Member	Vielka A Quezada	4624 NW 114th Ave, Apt 907 Doral, FL 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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

Our business is dedicated to do business in the Forex Exchange market.

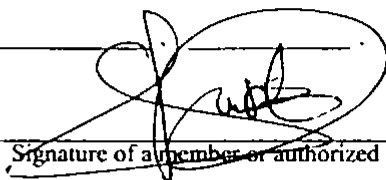
E. Effective date, if other than the date of filing: _____ (optional)

(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)

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 records.

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 08/12/19



Signature of a member or authorized representative of a member

Jean No Duarte

Typed or printed name of signee