L19600191868

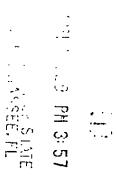
/Re	questor's Name)	
(ive	questoi s Mairie)	
DA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
	_	
<u> </u>		
Special Instructions to	Filing Officer:	İ
:		
		<u> </u>

Office Use Only



200362439372

03/29/21--01015--011 **25.00



COVER LETTER

TO:

Registration Section

Division of Cor	porations		
	'S TRADE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	DIOGENES A CORDERO) PALMA	
		Name of Person	
	CORDERO'S TRADE LL	C	
		Firm/Company	
	8340 PRESTBURY DR		
		Address	
	ORLANDO, FL 32832		
	corderostrade@gmail.com	City/State and Zip Code	······································
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Diogenes Cordero		407 219-2489	
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration S	ection
Division of C	orporations	Division of Co	orporations
P.O. Box 632 Tallahassee, l		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORDERO'S TRADE LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{07/26/2019}{1}$ and assigned Florida document number L19000191868 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_. Florida _

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
			□Remove
			□Change
			□Add
			TRemove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
	 		□Add
			□Remove
			[] [] Change

ARTICLE III			
PROFESSIONAL AND COM	MERCIAL SERVICES FOR TH	E CARE, OF PEOPLE'S HEALTH AND	_
BEUTY, MAINTENANCE C	OF MEANS OF TRANSPORT, A	LL LAWFUL BUSINESS	_
		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
<u>-</u>			
			
			_
ective date, if other than the (date of filing:	(optional)	
e: If the date inserted in this blo	ck does not meet the applicable st	of filing or more than 90 days after filing.) Pursuant to datatutory filing requirements, this date will not be b	605.02 listed
ument's effective date on the De	partment of State's records.		
cord specifies a delayed effective tiled.	date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th day a	fter th
ed MARCH 17	2021	1	
cu		Tane 9	
		(Jane	

Filing Fee: \$25.00