L19000230193

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		11/9/20

Office Use Only



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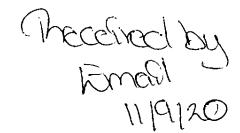
09/11/20--01010--001 **25.00

SECRETARY OF STATE
TALLAHASSEE, FL

11/12/20







FLORIDA DEPARTMENT OF STATE Division of Corporations

October 21, 2020

ANA MARIA SORIANO 7901 4TH STREET N STE 300 ST. PETERSBURG, FL 33702

Ref. Number: L1900020193

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 520A00020881

COVER LETTER

TO:

		ation Section of Corpor			
SUBJEC	~ _T . R⁄	AL GLOBA	LTRADING, LLC		
30000	- · ·		Name of Limi	ited Liability Company	
The encl	osed Ar	ticles of An	endment and fee(s) are sub-	mitted for filing.	
Please re	eturn all	corresponde	ence concerning this matter	to the following:	
			Ana Maria Soriano		
				Name of Person	
			RAL Global Trading, LLC	2	
				Firm/Company	
			7901 4th Street N. Stc. 30	0	
				Address	
			St. Petersburg, FL 33702		
				City/State and Zip Code	
		-	anasoriano@outlook.com		
For furth	er infor	mation conc	erning this matter, please ca	to be used for future annual report n	оппеанон)
i or raiti	ici iiitoi	marron con	erining this matter, product of		
Апа М.	. Soriano		·	at (416 949.6616	time Telephone Number
		Name of Pe	rson	Area Code Day	time Telephone Number
Enclosed	d is a che	eck for the f	ollowing amount:		
≡ \$25.	.00 Filin	g 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)
		z Address: ration Sec	etion	Street Address: Registration S	
	_	on of Cor		Division of C	
	P.O. E	30x 6327		The Centre o	
	Tallah	assee, FL	<i>323</i> 14	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2020 NOV -9 PM 4:59

RAL Global Trading, 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 September 11, 2019 _____ and assigned Florida document number 19000250195. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MOOW USA, LLC 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.

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>	Address	Type of Action
N puckture	Leandro Osorio de Vargas	7901 4th Street N., Ste. 300	□Add
Wember)	St. Petersburg, FL 33702	Remove
			□Change
Wenter	Roberto Nejm Junior	7901 4th Street N., Ste. 300	□Add
		St. Petersburg, FL 33702	■Remove
			Change
Memcin	Zulaine Teles Ribeiro	7901 4th Street N., Ste. 300	≡ Add
Mompe Mombe	×	St. Petersburg, FL 33702	□Remove
			□Change
			□Add
			□Remove
			□Add
			Change
			□Add
			□Remove
			Change

Frective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 dates after filing.) Pursuant to 605,020 lots; if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a occument's effective date on the Department of State's records. 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 is filed. September ! 2020 Signature—F-TREmber or Juthorized representative of a member Zulaine Teles Ribeiro			h additional sheets, if necessary.)
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