11000 257 186

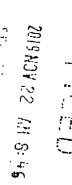
(Requestor's Name)
(Address)
(Address)
(
(0
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
· -
Special Instructions to Filing Officer:
Special matructions to 1 ming officer.
1

Office Use Only



200337298542

11/22/19--01018--019 **25.00



COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC	TRIADE L	LC		
30000	~·· <u></u>	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		ANDRE M BORGES		
			Name of Person	
		TRIADE LLC		
			Firm/Company	
		10572 SW 77TH TER		
			Address	
		MIAMI, FL, 33173		
			City/State and Zip Code	
		amctborges@gmail.com		
		E-mail address: (to be used for future annual report notif	ication)
For furth	ner information c	oncerning this matter, please ca	all:	
ANDRE	E BORGES		786 3005439 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	d is a check for t	he following amount:		
\$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 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

TRIADE LLC				
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on ou d Liability Company)	r records.)		
The Articles of Organization for this Limited Liability Compar	ny were filed on 10/14/201	<u> </u>	and as	ssigned
Florida document number L19000257186				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	ability company here:			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designati	on "LLC" or the abb	reviation "l	lIC."
Enter new principal offices address, if applicable:			-	
(Principal office address MUST BE A STREET ADDRESS)			_	
		7	<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>	
			- <u> </u>	
Enter new mailing address, if applicable:		·	NOV 2	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			22	;
		<u> </u>		11
			ငှာ	\bigcirc
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our ere:	records, enterit	the name	of the
	_			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida stre	et address	_	
		, Florida		
		, FIORMS	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>	Type of Action
AR	ANA C MARINS	_	
			■ Remove
			□ Change
MBR	ANDRE M BORGES		
			☐ Remove
			■ Change
-		-	Add
			☐ Remove
			Change
			Add
		. 	Remove
			Change
			Remove
			Change
	-		Add
			☐ Remove

Remove Registered Agen	Signature: ANA C MARINS.	
Include in Article VI that	ANDRE M BORGES is SINGLE MEMBER.	
	<u> </u>	
		
	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	
tive date if other than	the date of filing: (optional)	
If the date inserted in this	the date of filing:	aiant to 605.0 not be listed
ecord specifies a dela e 90th day after the i	yed effective date, but not an effective time, at 12:01 a.m. on t record is filed.	he earlier
d 11/18		
	man	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00