## L19000303863

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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04/27/22--01013--001 \*\*30.00

S. PRATHER

Florida Department of State Division of Corporations

I hereby confirm my agreement to be REMOVED from your records as a MANAGER of Roque Trades LLC. Effectively immediately.

Lauren Roque

3214 Wedgewwod Plaza Dr.

Riviera Beach, FL 33404

## **COVER LETTER**

TO:		ation Sect of Corpo				
SUBJE	CT.	Ra	UE TRADES	LLC		
30031					Liability Company	
The en	closed Art	icles of A	mendment and fee(	s) are submitt	ed for filing.	
Please	return all	correspon	dence concerning th	nis matter to t	he following:	
				Λ		
			<del></del>	CARLO	Name of Person	
			<del></del>	toau.	Firm/Company	
			<u> 3214 b</u>	JEMENO	OD PLAZA DR. Address	
					Address	
				favi Epp	SEACH / FL 332 City/State and Zip Code	104
				Č	City/State and Zip Code	
			- F mai	Carc	Euled for luture annual report no	(fication)
For fur	ther infor	nation cor	ncerning this matter		e aged for factore annual report no	meation
	$\sim$	A 2 1 7 C	Poque			7 a 0
		Name of I			at (312) 560 - Area Code Daytir	ne Telephone Number
					•	•
Enclos	ed is a che	ck for the	following amount:			
□ <b>\$</b> 2	5.00 Filin	g Fee	S30.00 Filing I Certificate of		S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Division P.O. B	Address: ration So on of Co ox 6327 assee, Fl	ection rporations		Street Address: Registration Se Division of Co The Centre of 2415 N. Monre	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

O	F	APR 27	
ROQUE TRADES LLC		(27 ARY ASSE	OB. III.
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.)		
(A Florida Limited L	iability Company)	AH 10:	•
The Articles of Organization for this Limited Liability Company	were filed on DECEMBER 13, 2019	FLORASsigned	
Florida document number <u>L 19000303863</u> .	·	A	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "LLC" or the abbre	eviation "L.L.C."	_
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 a agent and/or the new registered office address here:	ddress on our records, enter the name of	of the new regist	<u>tered</u>
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>	Name	Address	Type of Action
MGR	LAUREM ROQUE	3214 WEXCWOOD PYZA DR	□Add
		RÍVIERA BEACH, FL 33404	XRemove
			□Change
			□Add
		<del></del>	□Remove
			□Add
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		<del></del>	□Remove
			□C1

D. If ameno	ling any other information, enter change(s) here: (Attach additional sheets, if necessar	ry.)		
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F Effective	e date, if other than the date of filing: (optional	<b>N</b>		
(If an effect <u>Note:</u> If	edate, if other than the date of filing:	g.) Pursuant to 605		
If the record s	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) T	he 90th day afte		
Dated	April 22nd, 2022.	SCHALLAHASSEE, FLOR	2022 APR 27 AN IO: 4	
		HAS	YPR :	.17
	Signature of a momber of authorized representative of a member	SEE	27 /	11.1
	CARLOS ROQUE	F ST. FLO	AH IC	Ο
	Typed or printed name of signee	<u> </u>	±=	

Filing Fee: \$25.00