

L200000025496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

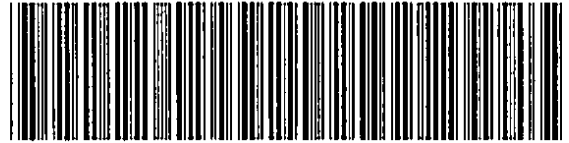
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED

2020 MAR 10 PM 14 55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
MAR 20 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STOCKCRAFT LLC  
\_\_\_\_\_

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

My Corporation Business Services Inc

\_\_\_\_\_  
Firm/Company

26025 Mureau Rd Ste 120

\_\_\_\_\_  
Address

Calabasas, CA 91302

\_\_\_\_\_  
City/State and Zip Code

processing@mycorporation.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Processing Department

877 692-6772  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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>
AMBR	TRADEZERO HOLDINGS INC.	9510 MCANEENY COURT	<input type="checkbox"/> Add
		WELLINGTON, FL 33414	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	TRADEZERO HOLDING INC.	5700 Lake Worth Road Unit 209-2	<input checked="" type="checkbox"/> Add
		Lake Worth, FL 33463	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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)(b)

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.

John Nucantella  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**