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(Address)

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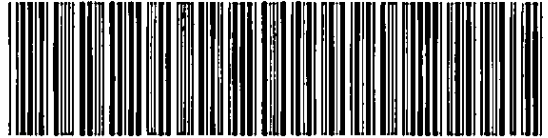
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SEARLES, SHEPPARD & GORNITSKY, PLLC

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Joshua I. Gornitsky, Esq.
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110 E. Broward Blvd., Suite 1570
Fort Lauderdale, FL 33301
Telephone (954) 526-8811
www.ssg.law

Reply to:
Fort Lauderdale Office

February 25, 2020

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

Re: *Capital Trade Holdings, LLC*
[Amendment to Articles of Organization]

Dear Sir or Madam,

Please be advised that this office represents the interests of Capital Trade Holdings, LLC. Enclosed herewith is a Cover Letter and Original Articles of Amendment of Articles of Organization for Capital Trade Holdings, LLC. I would appreciate your prompt filing and updating of your records in accordance with the amendment.

If you should have any questions or concerns, please do not hesitate to contact this office at your earliest convenience and ask for me, Sean P. Sheppard. I can be reached at (954) 632-0668.

Thank you for your time.

Best regards,



Sean P. Sheppard
PARTNER

Encl.

Offices

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAPITAL TRADE HOLDINGS, 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:

Sean P. Sheppard, Esq.
Name of Person
Searles, Sheppard & Gornitsky, PLLC
Firm/Company
110 E. Broward Blvd., Suite 1570
Address
Fort Lauderdale, FL 33301
City/State and Zip Code
sean@ssg.law
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sean P. Sheppard, Esq. at (954) 632-0668
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CAPITAL TRADE HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

02/10/2020 09:11:01

The Articles of Organization for this Limited Liability Company were filed on 02/10/2020 and assigned Florida document number L20000046120.

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 "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 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

_____, **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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Oleksii Filin	54 Atamana Chepygy Street	<input checked="" type="checkbox"/> Add
		Odesa, Ukraine 65003	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Samuel Klebener	110 E. Broward Blvd., Suite 1570	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33301	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
P	Samuel Klebener	110 E. Broward Blvd., Suite 1570	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33301	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
S	Samuel Klebener	110 E. Broward Blvd., Suite 1570	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33301	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
T	Samuel Klebener	110 E. Broward Blvd., Suite 1570	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33301	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

