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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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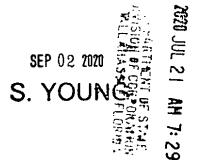
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## **COVER LETTER**

	egistration Secti ivision of Corpo				
SUBJECT	. G&Jinto	ernational Trading LLC			
JOIN EC I	•	Name of Limited	Liability Company		
The enclos	sed Articles of A	mendment and fee(s) are submi	tted for filing.		
Please reti	um all correspon	dence concerning this matter to	the following:		
	٠		Thais Granados		
			Name of Person		
	•	· ·			
			Firm/Company		٠
		3	6 NW 6 AVE PH2		
			Address		
			Miami, FL 33128		
		-	City/State and Zip Code	· ·	
		E-mail address: (to	haisire@gmail.com be used for future annual report noti	fication) .	
For furth	er information o	oncerning this matter, please cal	11:	•	
	Thais	Granados	a(_305_)968-21	96	٠.
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclose	d is a check for th	ne following amount:	t.		
□ \$25	i.00 Filing Fee	\$30.00 Filing Fee &     Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is et	tus &

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 ARTICLES OF ORGANIZATION

G & J International Trading LLC  (Name of the Limited Liability Company was Included Company was Included Company was Included Actional Amendation of this Limited Liability Company was Included document number	ere filed on(	02/20/202	LC or the ebt	and assigned	3
The Articles of Organization for this Limited Liability Company we lorida document number	ty company h	02/20/202	LC or the ebt		当
It is amendment is submitted to amend the following:  If amending name, gnter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS:  Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX:	y Company," the d	designation "L	LC or the abi		
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gent and/or the new registered office address here:	. •	• •			*
		•	•		
Name of New Registered Agent: Thals Gran	acos		·	·	_
ac that c	AVE APT PH	H2		i.	_
New Registered Office Address: 36 NW 6		lorida street os	Mress		-
Miami			. Florida	33128	
	City		_, = NA NAA	Zip Code	
lew Registered Agent's Stenature, if changing Registered Agent;	-				

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to a provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the abligations 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 = Ma	anager athorized Member		
Title	Name	Address	Type of Action
			🗖 Add
•			🖸 Remove
			OChange
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	fing any other information, enter change(s) here: (Attach additional sheets, if necessary:)	
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ote: If:	date, if other than the date of filing:	5.02° ed :
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte	r th
nted	July 19th	
	Signification of a member of authorized representative of a member	

Filing Fee: \$25.00