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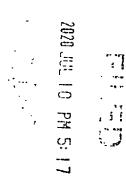
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Office Use Only



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AUG 21 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: International Trading Link 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:
Chada Maghrebi Name of Person
International Thading Link LLC
2308 W Jetton Ave
Tampa FL 33629 City/State and Zip Code
E-mail address: (to be used for Chure annual report notification)
For further information concerning this matter, please call:
Shada Maghyebi at (813) 408 - 3236 Name of Persoft Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S60.00 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

Lnternational Tha	ding Link LLC
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ompany)
The Articles of Organization for this Limited Liability Company were file Florida document number <u>L20000 L4448</u> \	ed on $05/27/2020$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	P 111
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
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 agent and/or the new registered office address here:	on our records, enter the name of the new registered
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>	Address	Type of Action
MGR	Jad Madi		
		2308 W Jetton Ave Tan	DA FL PRemove
		/	33629
			Change
			□Add
			□ Remove
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Filing Fee: \$25.00