L20000247717

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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12/14/20

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2020 DEC 14 AM 7:51 SECRETARY OF STATE

12/05/20



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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 2, 2020

VICKI ELLSWEIG 240 SNOWFIELDS RUN HEATHROW, FL 32746

SUBJECT: PONG OPTIONS TRADING LLC

Ref. Number: L20000247717

We have received your document for PONG OPTIONS TRADING LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 820A00024022

Querida R Moore Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Sec Division of Corp		,	
SUBJECT: OY	Name of Limit	ited Liability Company	<u></u>
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Pong O 240 Snor Heat	Name of Person Name of Person Office Office	1LC 32746
	E-mail address: (t	() () .	ation)
For further information cor	Person	at (407) 718-	6049 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:		Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT

ТО	
ARTICLES OF ORGANIZATION	Ī
OF	

#	1	3	1	7
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Pong Optims Ta	ading	LLC	2020 DEC 14	AH 7:51
(Name of the Limited Liability (A Florida)	y Čompany ayıtı Limited Liability	now appears on or Company)	m. webtar)	OF STATE
· · · · · · · · · · · · · · · · · · ·	J	Λ	TALLY &	
The Articles of Organization for this Limited Liability Co	ompany were fi	led on <u>MU</u> Q	UST 13, 2	Wand assigned
Florida document number <u>L 2 0 000 3 47 7 1</u>	7	1	,	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability con	npany here:		
The new name must be distinguishable and contain the words "Limit	red Liability Com	ouny " the decionat	ion "LLC" or the ab	shraviation "L. I. C."
The new name mass of distinguishable and contain the words. Elimin	ica maning com	mily. The designar	ion 13.50 of the de	ore viacion 15.12.C.
Enter new principal offices address, if applicable:	-		. .	
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address	on our records	s, <u>enter the nam</u>	<u>ie of the new register</u>
igent and/or the new registered office address here.				
Name of New Registered Agent:				
-	-		- .	
New Registered Office Address:		Enter Florida stre	ret address	
			. Florida	
	City		1 10/1da	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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Adam Ellsweig	240 Snow Fields Run	□Add
	()	240 Snowfields Run Heathrow, Fl 32746	Remove
		- -	□Change
AMBR	Arthur Ellsweig	240 Snow Fields Run Heathrow, F/ 32746	🗆 Add
	J	Heathrow, F/ 32746	Remove
			□Change
			□Add
			Remove
			□Change
			🗆 Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change

If an et Note:	tive date, if other than the date of filing:
	rd 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
	ned.
rd is f	λ
e reco ord is f Dated	$\frac{1}{2}$