LZ0000278253

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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TO:

	Registration Se Division of Con			
SUBJEC*	r. FASTFO	DRWARD TRADING CO	OMPANY LLC	
SOBJEC	··	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	urn all correspo	ondence concerning this matter	to the following:	
		CARLOS BISIO		
			Name of Person	
		FASTFORWARD	TRADING COMPANY LLC	
			Firm/Company	·
		2276 NW 82ND A	AVE	
			Address	
		DORAL, FLORI	DA. 33122	
		INICOCEACICIA	City/State and Zip Code	
		INFO@FASTFV	VDUS.COM to be used for future annual report noti	(feetien)
For furthe	r information c	concerning this matter, please c	·	neadon)
CARL	OS BISIO		at (786) 495-66	10
	Name o	f Person		e Telephone Number
Enclosed i	is a check for t	he following amount:		
□ \$25.0	0 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 Status & Certified Copy (additional copy is enclosed)
F	<u>failing Addres</u> Registration	Section	<u>Street Address:</u> Registration Se	ction
		Corporations	Division of Cor	
	2.O. Box 632 Taliahassee, 1		The Centre of T 2415 N. Monro	fallahassee e Street, Suite 810

Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FASTFORWARD TRADING COMPANY LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{9/7/2020}{1}$ Florida document number L20000278253 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

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>	Name	Address	Type of Action
MGR	CARLOS BISIO	9595 FONTAINEBLEAU BLVD APT 1906	≣ Add
		DORAL, FLORIDA. ZIP CODE: 33172	□Remove
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		9/8/2020			
Effective date, if oth	er than the date of fil	ling:		(option	al)
l an effective date is listed	d, the date must be specific	and cannot be prior to d	ate of filing or more	than 90 days after fil	ling.) Pursuant to 605,0207
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Filing Fee: \$25.00