

# L20000316144

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

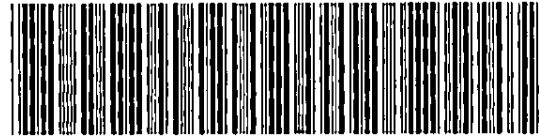
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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Special Instructions to Filing Officer:

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155 Office Plaza Dr Ste A Tallahassee FL 32301  
PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 11/2/20**

**NAME: FUTURES TRADING PRO LLC**

**TYPE OF FILING: AMENDMENT**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*A. Hodge*

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FUTURES TRADING PRO 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:

PETE RENZULLI  
Name of Person

Firm/Company

300 SCOTIA AVE #202  
Address

HYPOLEXO FL 33462  
City/State and Zip Code

pete@stocktradingpro.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PETE RENZULLI at (631) 804-4094  
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

FUTURES TRADING PRO LLC

**If Changing Registered Agent, Signature of New Registered Agent**


**MGR = Manager**  
**AMBR = Authorized Member**

Title	Name	Address	Type of Action
MGR	PETE RENZULLI	300 SCOTIA DRIVE #202 HYPOLEXO FL 33462	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FL  
CLERK OF DISTRICT COURT

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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 NATIONAL BUREAU OF STANDARDS  
 U.S. DEPARTMENT OF COMMERCE  
 100 BUREAU DRIVE  
 GAITHERSBURG, MARYLAND 20899

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 10/26/2020

  
Signature of a member or authorized

Signature of a member or authorized representative of a member

JASON STOGSDILL

Typed or printed name of signee

**Filing Fee: \$25.00**