L21000415230

(Requ	estor's Name)	
(Addre	ess)	
(Addre		 _
(Addre	:55)	
(City/S	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
/Duein	nes Entity Nom	
(Busin	ess Entity Name	e)
(Docu	ment Number)	
Certified Copies	Certificates of	of Status
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Special Instructions to Fili	ng Officer;	

Office Use Only



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COVER LETTER

ТО:	Registration Sc Division of Cor		 •	
8111111	999 TRAD			-
SUBILI	CT:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		NIGHAT TARIQ		
			Name of Person	
		999 TRADING LLC		
		11	Firm/Company	
		7901 4TH ST. N. SUITE 6	5082	
			Address	
		ST, PETERSBURG, FL, U	JS 33702	
		999tradinglle@gmail.com	City/State and Zip Code	
		- · · ·	to be used for future annual report notifi	cation)
For furth	ner information c	oncerning this matter, please ca	ull:	
NIGHAT TARIQ		786 954-2833		
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	ne 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

999 TRADING LLC	
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L21000415230</u>	pany were filed on SEPTEMBER 20, 2021 and assigned
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 $\frac{1}{r-2}$.L.C."
Enter new principal offices address, if applicable:	· ·
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, <u>enter the name of the new regis</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zin 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
AMBR	NIGHAT TARIQ	7901 4 FH ST. SUITE 6082	■Add
		ST. PETERSBURG, FL, US 33702	□Remove
			Change
			□Add
			□Remove
			□ Change
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ective date, if other than the effective date is listed, the date most	date of filing:	and an excellence of	Clin	(optiona) -) Dominion (+ 40)5 (0)
e: If the date inserted in this blo	ck does not meet the ap	oplicable statu	ning or more man itory filing requir	on days after turn ements, this dat	e will not be listed
ument's effective date on the De	partment of State's reco	ords.			
	data transcriptori		.01	ar e als u	St. Maria I
cord specifies a delayed effective s filed.	date, but not an effecti	ve time, at 12	nor a.m. on the e	iriier of: (b) = 1	ne 90th day after t
AUGUST 11	2023				
	11	8-1-	7		
 -	Signature of a member of	10	2009 /	wher	

Filing Fee: \$25.00