

U21000431291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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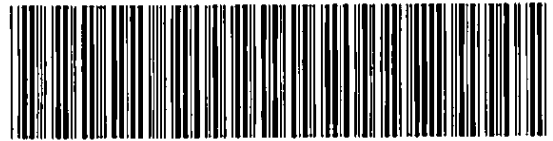
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 32301

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

TraderLion 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:

Ross Haber

Name of Person

TraderLion LLC

Firm/Company

1600 S. Ocean Dr. 18D

Address

Hollywood, FL 33019

City/State and Zip Code

rhabe@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ameet Rai

Name of Person

at (587)

Area Code

434-1993

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Trader Lion L.L.C.

(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 Oct. 1, 2021 and assigned Florida document number L2100431291.

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)

1600 S. Ocean Dr, 1800  
Hollywood, FL 33019

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

same as above

**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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Ross Haber	1600 S. Ocean Dr.	<input type="checkbox"/> Add
		18D	<input type="checkbox"/> Remove
		Hollywood, FL 33019	<input checked="" type="checkbox"/> Change
MGR	Ameet Rai	84 Coalee Way SW	<input type="checkbox"/> Add
		Calgary, AB T3H0S4	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Nicholas Schmidt	234 Pearl St.	<input type="checkbox"/> Add
		BaitonKema, NY 11779	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Richard Maglen	1730 NW 56 St.	<input type="checkbox"/> Add
		Apt. 4	<input type="checkbox"/> Remove
		Seattle, WA 98107	<input checked="" type="checkbox"/> Change
		just moved from	<input type="checkbox"/> Add
		302 Dale Dr.	<input type="checkbox"/> Remove
		Silver Spring, MD 20910	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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TAND  
1954

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**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**

October 19, 2021

Signature of a member or authorized representative of a member

Ross Haber  
Typed or printed name of signer

Typed or printed name of signer

**Filing Fee: \$25.00**