## LZ1000507358

| (Requestor's Name)                      |
|-----------------------------------------|
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| (Address)                               |
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| (Address)                               |
| (Address)                               |
|                                         |
| (City/State/Zip/Phone #)                |
|                                         |
| PICK-UP WAIT MAIL                       |
|                                         |
| (Business Entity Name)                  |
| (Business Entity Harrie)                |
|                                         |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer. |
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Office Use Only



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2023 SEP 18 PM12: 29



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2023

CORY LEWKOWITZ TRADER'S LANDING, LLC 1065 SW 8TH ST UNIT 428 MIAMI, FL 33130 US

SUBJECT: TRADER'S LANDING, LLC

Ref. Number: L21000507358

We have received your document for TRADER'S LANDING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or copy our filing will be considered abandoned.

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

Antoinette A Gonzalez Regulatory Specialist II

Letter Number: 123A00017622

SEP 1 8 2023

## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

| Division of Cor                       | porations                                       |                                                                     |                  |                       |
|---------------------------------------|-------------------------------------------------|---------------------------------------------------------------------|------------------|-----------------------|
| TRADER'S                              | LANDING, LLC                                    |                                                                     |                  |                       |
| SUBJECT:                              | Name of Lim                                     | ited Liability Company                                              |                  |                       |
|                                       |                                                 |                                                                     |                  |                       |
| The enclosed Articles of              | Amendment and fee(s) are sub                    | mitted for filing.                                                  |                  |                       |
| Please return all correspo            | ondence concerning this matter                  | to the following:                                                   |                  |                       |
|                                       | CORY LEWKOWITZ                                  |                                                                     |                  |                       |
|                                       | Name of Person                                  |                                                                     |                  |                       |
|                                       | TRADER'S L <u>AN</u> DING, L                    | LC                                                                  |                  |                       |
| Firn/Company                          |                                                 |                                                                     |                  |                       |
| 1065 SW 8th St Unit 428               |                                                 |                                                                     |                  |                       |
|                                       |                                                 | Address                                                             |                  | 207                   |
|                                       | Miami, FL 33130                                 |                                                                     |                  | 2023 SEP 18 PM 12: 29 |
|                                       |                                                 | City/State and Zip Code                                             |                  |                       |
|                                       | cory@traderslanding.net                         |                                                                     |                  | ω<br><b>σ</b>         |
|                                       | E-mail address: (                               | to be used for future annual report notific                         | ation)           | P 18 PM 12:           |
| For further information c             | oncerning this matter, please c                 | all:                                                                |                  | 7F 2                  |
| CORY LEWKOWITZ                        |                                                 | 516 652-6288                                                        |                  | •                     |
| Name o                                | f Person                                        | at ()<br>Area Code Daytime '                                        | Felephone Number | •                     |
| Contained to a shoot for sh           | na fall suina assuunt                           |                                                                     |                  |                       |
| Enclosed is a check for th            | _                                               | = a.c. o.c. o.c.                                                    | = 440 00 mm      |                       |
| □ \$25.00 Filing Fee                  | □ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified C      | of Status &           |
|                                       |                                                 |                                                                     |                  |                       |
| Mailing Address: Registration Section |                                                 | <u>Street Address:</u><br>Registration Sect                         | ion              |                       |
| Division of Corporations              |                                                 | Division of Corp                                                    |                  |                       |
| P.O. Box 6327                         |                                                 | The Centre of Ta                                                    |                  |                       |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| TRADER'S LANDING, LLC                                                                                                    |                                                                |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| ( <u>Name of the Limited Liability Company</u><br>(A Florida Limited Liab                                                | as it now appears on our records.) bility Company)             |
| The Articles of Organization for this Limited Liability Company we Florida document number L21000507358                  | ere filed on 11/30/2021 and assigned                           |
| This amendment is submitted to amend the following:                                                                      |                                                                |
| A. If amending name, enter the new name of the limited liabilit                                                          | ty 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:                                                                      | 20                                                             |
| Principal office address MUST BE A STREET ADDRESS)                                                                       | 2 2                                                            |
| Enter new mailing address, if applicable:                                                                                | SEP 18 PH 12: 29                                               |
| B. If amending the registered agent and/or registered office add<br>agent and/or the new registered office address here: | dress on our records, <u>enter the name of the new registe</u> |
| Name of New Registered Agent:                                                                                            |                                                                |
| New Registered Office Address:                                                                                           | r - ri i i II                                                  |
|                                                                                                                          | 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>      | Address                 | Type of Action    |
|--------------|------------------|-------------------------|-------------------|
| MGRM         | ALYSSA LEWKOWITZ | 1065 SW 8th St Unit 428 |                   |
|              |                  | Miami, FL 33130         | □Remove           |
|              |                  |                         | ☐ Change          |
|              |                  | <del></del>             | □Add              |
|              |                  | <del></del>             | □Remove           |
|              |                  |                         | □Change           |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_ (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 Sintermher Signature of a member or authorized representative of a member CORY R. LEWKOWITZ Typed or printed name of signee