## L22 000 348831

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## **COVER LETTER**

TO: Registration Se Division of Cor				
	TRADING LLC			
SUBJECT:	Name of Limi	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  ESTEBAN PINO COVIELLO  Name of Person  HARDING TRADING LLC  Firm/Company  7300 BISCAYNE BLVD. SUITE 200				
	ESTEBAN PINO COVIEL	TO		
		Name of Person		
	HARDING TRADING LL	С		
		Firm/Company	*	22
	7300 BISCAYNE BLVD.	SUITE 200		SEP.
	·	Address	<u> </u>	20
	MIAMI, FL 33138			AH 10: 3
	ESTEBAN2465@GMAIL.C	City/State and Zip Code		EP 20 AH 10: 31
	E-mail address: (	to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please ca	all:		
ESTEBAN PINO COVI	ELLO	+1 7863342868		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for the	he 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 Certificate of Certified Cop (additional copy	i Status &
Mailing Addres	<u>ss:</u>	<u>Street Address:</u>		
Registration 5	Section	Registration Se		
Division of C P.O. Box 632		Division of Cor The Centre of T	•	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HARDING TRADING LLC		
(Name of the Limited Liability (A Florida Li	Company as it now appears on our record mited Liability Company)	<u>ls.</u> )
he Articles of Organization for this Limited Liability Con	npany were filed on 08/08/2022	and assigned
lorida document number L22000348831		
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	d liability company here:	
ARDING TRADING COMPANY LLC		
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRES	SS)	<u>N</u> =
		3S S
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nter new mailing address, if applicable:	<del></del>	<u> </u>
<u> 1 Aailing address MAY BE A POST OFFICE BOX</u>		<del></del>
		ω
If amending the registered agent and/or registered o ent and/or the new registered office address here:	ffice address on our records, enter	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	6.5
		orida
	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-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
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sument a effective date on the Department of State 8 records.	in not be in	ca u
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The is filed.	90th day af	ter the
ted SEPTEMBER 14th 2022		
i de la		
Signature of a member or authorized representative of a member		