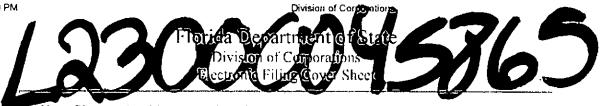
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From:

Account Name : POTENCIANO CPA LLC

Account Number : 120230000178

Phone

: (487)413-2411

Fax Number

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Email Address: janayna@potencianocpa.com



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		I	COVER LETTER		
TO: Re Di	gistration Se vision of Cor	ction porations			
Subject		RNATIONAL TRADING CO	MPANY LLC		
SUBIRCE	·	Name of Lim	ited Liability Company	Allian skillmannarrar a skurški spilli dir 5 spiral 1955 di	f.Status & cy
The enclose	ed Anicles of	Amendinent and tee(s) are sub	mitted for filing.		
Please retui	n all correspo	ndence concerning this matter	to the following:	· .	•
		Janayna Potenciano			
			Name of Person		
•		Potenciano CPA			•
•		منوا شروا المقالي و المدار كالمام و روست و المدار المام المام المام و المام و المام و المام و المام و المام و المام المام و	Firm Company		•
		6965 Piazza Grange Ave, !	STE 307		
			Address		
		OrlandovFL 32835			
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		janayna@potencianocpa.co			
		E-mail aderess: (to be used for future annual report notific	eation)	
For further	information c	onceming this matter, please c	all;	•	
Janayna Po	tenciano		407 413-2411 ai ()		_
	Name o	f Person	Area Code Daytime	Telephone Number .	
Enclosed is	a check for th	ne following amount:	. `		
∰ \$ 25,00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(2 \$55,00 Filing Fee & Certified Copy radditional copy is electrised)	560.00 Filing F Certificate of S Certified Copy (additional copy is	status &
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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

MSL INTERNATIONAL TRADI			ur records.)		
	(A Florida Lopired)	ny sy it novy appears on or Liability Company)		•	
The Articles of Organization for this Limited L Florida document number (123000045865)		were filed on January 2	25, 2023 and	l assigned	
This amendment is submitted to amend the following	lowing:				
x. If amending name, enter the new name of	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designar	ion "I.I C" or the abbreviation	m "1,1.C."	
Enter new principal offices address, if applicable:		1317 Edgewater Dr.			
Principal office address MUST BE A STREE		#6251			
		Orlando, FL 32804		<u>[]</u>	
				iii III:	
Enter new mailing address, if applicable:		1317 Edgewater Dr	د ملت و مسال في شار لكن من د موس و 180 ما 180 من يقتل من و مدارد ما 180 من و تقو من و مدارد ما المعتب	-	
Mailing address MAY BE 4 POST OFFICE	BOX)	#6251	28		
		Orlando, PL 32804	9 (1) 3 (1)		
If amending the registered agent and/or seent and/or the new registered office address Name of New Registered Agent:			s, enter the name of the	3	
	1317 Edgewate	r Dr. #6751			
New Registered Office Address:	Enter Florida street address				
	Orlando Ciry		Florida 328(14		
•		Ciņ:	Zip C	ode	
ew Registered Agent's Signature, if changing	Registered Agent:			,	
I hereby accept the appointment as register provisions of all statutes relative to the prop accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as pregistered office	performance of my di provided for in Chapte	uties, and Lam familia er 605, F.S. Or, if this	r with and document is	

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>	Name .	Address	Type of Action
AMBR	SAKO, SERGIO L	1317 Edgewater Dr.	□Add
		#6251	- Remove
	,	Orlando, FL 32804	
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