(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(,,,				
PICK-UP WAIT MAIL				
(Duning and Entire Marce)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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INHS18 (2:14)

TO: Registration Section Division of Corporations					
SUBJECT: LDR Trades					
Nan	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	fice Change a	nd fee(s) are submitted for filing.			
Please return all correspondence concerning th	nis matter to th	ie following:			
Robyn Giang					
Name of Person					
LDR Trades					
Firm/Company					
4522 W. Village Dr no. 6038					
Address					
Tampa, FL 33624					
City/State and Zip Code					
Info@ldrtrades.net					
E-mail address: (to be used for future am	nual report no	tification)			
For further information concerning this matter	, please call;				
Robyn Giang	at (<u></u>)614-0061			
Name of Person		Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:		MAILING ADDRESS:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301		Flallahassee, Florida 32314			
Enclosed is a check for the following	g amount:				
\$25 Filing Fee	ت	\$55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Ni	nme of the limited liability company: LDR Trades [40	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(h)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4522 W. Village Dr # 6038	4522	2 W. Village Dr #6038
	Tampa FL 33624	Tam	pa FL 33624
	4/26/2023	L2300	00206024
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Robyn Giang		
, ,	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	of State:
			
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>	
	4522 W. Village Dr #6038	····	202 202
	Tampa . F1.	33624	29 年 34 次 5 所
(b)	Registered Agents Inc		SECRETARY 2023 MAY 12
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	2000 m
	7901 4th Street N ste 300		8: 01
	NEW Registered Office Address:		_ .
	St. Petersburg , FI.	33702	
the cha agent v was/wa the art	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited licere authorized by an affirmative vote of the members of organization or the operating agreement of the ture of a member or adnorized representative of a member	the registered of ability company of the limited his limited liability Robyn G	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company. iang Printed or typed name of signee
I here provisi the obj to mer notifie	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I if in writing of this change.	ree to act in this performance o d for in Chapte hereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent