L23000238867

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DEC 10 S. PRATHER

COVER LETTER

	Registration Se Division of Cor		•		
5110 10 <i>7</i>		ARK SINN SHIPPING LLC			
SUBJEC	vI;				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		JOSUE D POLO			
Name of Person					
TRADESPARK SINN SHIPPING LLC					
			Firm Company		
496 PONDEROSA DR					
		SAINR CLOUD, FL 3476	9		
City/State and Zip Code ARIASFRANCY@ALCYTAX.COM E-mail address; (to be used for future annual report notification)					
JOSUE 1	D POLO		407 6189957 at ()		
	Name e	of Person	Area Code Daytin	ne Telephone Number	
Enclosed	is a check for the	he following amount:			
□ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	[4] \$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		Street Address: Registration Se	ection	
Registration Section Division of Corporations		Division of Corporations			
P.O. Boy 6327		The Centre of	Fallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF O	ORGANIZATION	202
()F	- 4
TRADESPARK SINN SHIPPING LLC		
	one as it now appears on one seconds.)	<u>, γ</u> γ. ω
(A Florida Limited)	any as it now appears on our records.) Liability Company)	
		©: ~√
The Articles of Organization for this Limited Liability Company	were filed on 05/15/2023	and assigned >
Florida document number 1.23000238867		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility 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)		<u> </u>
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Totaling dualtess MAT BE AT OST OTTICE BOX		-
B. If amending the registered agent and/or registered office	address on our records, enter the na	me of the new registered
agent and/or the new registered office address here:		
A		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	-
	, Florida	
	Cist	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>	<u>Address</u>	Type of Action
			
			□Remove
			□Change
			□ Add
			□Remove
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			⊡Adđ
			□Remove
			□Change
			□Remove
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) CHANGE ACTIVITY: ANY BY LAW 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. November 04 2024 Signature of a member or authorized representative of a member

Filing Fee: \$25.00