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COVER LETTER

P.O. Box 6327

Document Ref GTKRH, IGSYP-SKE CLAYDOS

Tallahassee, FL 32314

TO:		stration Section of Corp				
CUD 112/		Trading Har	nds International LLC			
SUBJEC	CI: _		Name of Lim	ited Liability Company		
			Amendment and fee(s) are sub	-		2024 SEP 10 AH 9: 43 SECRETARY OF STEEL
Picase ic	eium :	iii correspoi	ndence concerning this matter	to the following.		高等
			William Downs			る。ま
				Name of Person		25°C ± 0
			Trading Hands Internation	al 1.1.C		(10) F
				Firm/Company		
			126 North Keech St			
			•	Address		
			Daytona Beach, FL 32114			
				City/State and Zip Code		
			thewaydelv@gmail.com	to be used for future annual report no	Nification)	
For first	har inf	oemation ac	ncerning this matter, please co		onite strony	
			meering this matter, preuse ea			
William	1 Dow		D	386 852-1646 at () Area Code Days	ime Telephone Number	
		Name of	Person	Alea Code Days	ime Telephone Number	
Enclosed	d is a o	check for th	c following amount:			6. 11
■ \$25.	.00 Fi	ling Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Copy (additional copy	Status &
	Reg	ing Address istration S		Street Address: Registration S Division of C		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trading Hands International ELC		
(<u>Name of the Limited Lial</u> (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L23000347795	y Company were filed on 07/24/2023	and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	2024 SEI SECRE TAL
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" o	
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET AD	DRESS)	1177
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office address on our records, enter th	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Flori	da
	City	Zip Code
New Registered Agent's Signature, if changing Register	ered Agent:	
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my duties, and I agent as provided for in Chapter 605, F., ered office address, I hereby confirm that	I am familiar with and S. Or, if this document is
	If Changing Registered Agent, Signature of N	iew Registered Agent

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

Deciment Ball CTVPH, ICEVP 6V51 O MVDDS

<u>Title</u>	Name	Address	Type of Action
MGR	Daniel Powell Sr	313 Cockle Shell Loop	■Add
		Apolio Beach, FL 33573-3534	□Remove
			□Change
			□Add
			□Remove
			Change
			SECRETA TALLAL
			PR Change 19 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			□Change
			□Add
			Remove
			Change
			□Remove
			□Change

Page 5 of 6

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	annot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 et the applicable statutory filing requirements, this date will not be l	listed as t
August 29		
arcu,	2024	
William D		
Signature of a men		
William Downs	mber or authorized representative of a member	-

Filing Fee: \$25.00