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DATE: 05/14/2024

NAME: TRADING COMPANY SERVICES JD LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	COMPANY SERVICES JD L	LC				
	Name of Lim	ited Liability Company				
d Articles of	. Amendment and fee(s) are sub	omitted for filing.				
n all correspo	ondence concerning this matter	to the following:				
	Roberth Antonio Rodrigue	z Loreto				
		Name of Person				
	TRADING COMPANY S	ERVICES JD LLC				
		Firm/Company				
	10864 NW 40TH ST					
		s) are submitted for filing. nis matter to the following: Rodriguez Loreto Name of Person IPANY SERVICES JD LLC Firm/Company I ST Address 3351 City/State and Zip Code com address: (to be used for future annual report notification) please call: 1 786 3 961792 at (10 Area Code Daytime Telephone Number Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy				
	SUNRISE, FL 33351					
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Division of Corporations		Division o	Division of Corporations			
			e of Tallahassee Monroe Street, Suite 810			
	TRADING TRADING d Articles of a life corresponding to the correspondin	Name of Lim In all correspondence concerning this matter Roberth Antonio Rodrigue TRADING COMPANY S 10864 NW 40TH ST SUNRISE, FL 33351 evaconllc@gmail.com E-mail address: (information concerning this matter, please of driguez Name of Person a check for the following amount: Filing Fee \$\square\$ \$30.00 Filing Fee & Certificate of Status alling Address: egistration Section vision of Corporations O. Box 6327	TRADING COMPANY SERVICES JD LLC Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: Roberth Antonio Rodriguez Loreto Name of Person TRADING COMPANY SERVICES JD LLC Firm/Company 10864 NW 40TH ST Address SUNRISE, FL 33351 City/State and Zip Code evaconllc@gmail.com E-mail address: (to be used for future annual reprintermation concerning this matter, please call: driguez 786 39617 Area Code a check for the following amount: Filing Fee S10.00 Filing Fee & Certified Copy (additional copy is enclosed) stilling Address: gristration Section vision of Corporations Division of Copporations Division of Control			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 MAY 14 AM 9: 08 TRADING COMPANY SERVICES JD LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) TALLAHASSEE, FLORIDA The Articles of Organization for this Limited Liability Company were filed on $\frac{12/22/2023}{2}$ and assigned Florida document number L24000001077 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _____, Florida ____ Cuy

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
AMBR	MARQUEZ MATHEUS, ZULAIM	10864 NW 40TH ST	
		SUNRISE. FL 33351	
			Change
MGR	Roberth Antonio Rodriguez Loreto	10864 NW 40TH ST	■Add
		SUNRISE, FL 33351	□Remove
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