L24000/42439

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COVER LETTER

TO:		tration Sect						
	(CULLINAN TRADING LLC						
SUBJE	CT: _	Name of Limited Liability Company						
The encl	losed /	Articles of A	mendment and fee(s) are sub-	nitted for filing.				
Please re	eturn a	ll correspond	dence concerning this matter t	o the following:				
			Jatinkumar Patel					
				Name of Person				
			Jatinkumar Patel					
				Firm/Company		<u> </u>		
			68 Allison Drive					
				Address				
			Sayreville, NJ 08872					
		City/State and Zip Code						
			krupajpatel@yahoo.com E-mail address: (to be used for future annual report notification)					
For furth	ner info	ormation con	ncerning this matter, please ca			,		
Jatinkur				732	479-4303			
	_	Name of F	Person	at () Area Code) Daytime Te	elephone Number		
Enclosed	d is a c	heck for the	following amount:					
□ \$ 25	.00 Fil	ing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Fiting F Certified Copy (additional copy is	y	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Regi	ng Address: stration Se	ection	Regi	et Address: istration Sectionision of Corpo			
		sion of Co Box 6327			Centre of Tall			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CULLINAN TRADING LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000142439</u> .	were filed on March 22, 2024	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		752
	<u> </u>	
Enter new mailing address, if applicable:		552 4
Mailing address MAY BE A POST OFFICE BOX)		min as pro-
Maning dancess MAT BE A FOST OFFICE BOX)		- 1 2 - 2 2
 If amending the registered agent and/or registered office a gent and/or the new registered office address here: 	ddress on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	Cuv	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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TAURANI, HARRY	393 TOLEDO RD	□Add
		DAVENPORT, FL 33837	Remove
			□ Change
MGR	CHETAN K KOTAK	525 WASHINGTON BLVD	∃ Add
		3RD FLOOR SUITE 300	□Remove
		JERSEY CITY, NJ 07310	□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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Effective date, if other than th	e date of filing:		(optional)	
Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this t	ist be specific and cannot block does not meet the	be prior to date of filir applicable statutor	ng or more than 90 days y filing requirements	after filing.) Pursuant to this date will not be	605.0207 (1 listed as th
document's effective date on the l	Department of State's r	records.	, <u>e</u>		
the record specifies a delayed effecti cord is filed.	ve date, but not an effe	ective time, at 12:01	a.m. on the earlier of	of: (b) The 90th day	after the
cord is fried.					
Dated July 28	202:	5			
Dated					
	Chotan	Kotok	-		_
	Signature of a member	or authorized represe	ntative of a member		
CHETAN K KOTAK					
-	Typed	or printed name of sig	znec		-

Filing Fee: \$25.00