P04000149108

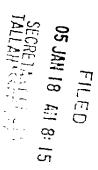
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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TRANSMITTAL LETTER

SUBJECT: PROTRADE FUTU	RES AND OPTIONS, INC.		
50.	(Name of Corporation)		
DOCUMENT NUMBER: P04	000149108		
The enclosed Officer/Director Resi	gnation for a Corporation and fee are submitted for filing		
Please return all correspondence co	ncerning this matter to the following:		
Michele LaB	ruce		
(Name of Pers	on)		
Protrade Futures And	i Options, Inc.		
(Name of Firm/Company)			
4000 Hollywood Blvd.	Ste. 370-N		
(Address)			
Hollywood, Fl	_ 33021		
(City/State and Zi	o Code)		
For further information concerning	this matter, please call:		
Michele LaBruce	at (954) 989 - 9938 (Area Code & Daytime Telephone Number)		
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 mad	e payable to the Florida Department of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399		

Amendment Section Division of Corporations

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Ţ	Summer Mote	, hereby resign as_	President / Director	
1, _		, norvoy resign as_	(Title)	
of	Protrade Futures And Options		,	
_	(Name of Corporation)			
	P04000149108 (Document Number, if known)	_, a corporation organized und	der the laws of the State of	
	Florida	_ •	o SE TAL	
			OS JAN , VECRETA, VLLAHAS	
		801	18 MB 8	
	(2	signature of resigning officer/direct	cor)	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314