## LICCO 164691

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## **COVER LETTER**

	ition Secti of Corpo				
	mens Meta	als LLC			,
SUBJECT:		Name of Limi	ited Liability Company		
		mendment and fee(s) are sub			
Please return all c	orrespond	ence concerning this matter	to the following:		
		Eric P. Gros-Dubois			·
			Name of Person		
		EPGD Attorneys at Law, P	P.A.		
		·	Firm/Company	•	
		2701 Ponce de Leon Blvd	Suite 202		1
			Address		
		Coral Gables, FL 33134			10000000000000000000000000000000000000
		eric@epgdlaw.com	City/State and Zip Code		N. D.
		<del>-</del>	to be used for future annual	report notification)	_ ن بری
For further inform	nation con	cerning this matter, please ca	ıll:		2 2
Eric P. Gros-Dub	oois		786 83	37-6787	-3 P 12: 59
	Name of P	erson	Area Code	Daytime Telephone	Number
Enclosed is a chec	ck for the	following amount:			
■ \$25.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en-	Closed) C	0.00 Filing Fee. Certificate of Status & Certified Copy additional copy is enclosed)
	Registrati Division of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Fl. 32314	Registra Division Clifton E	T/COURIER ADDR tion Section of Corporations Building ecutive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Termens Metals LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{10/04/2016}{10/04/2016}$ and assigned Florida document number \_\_\_\_\_L16000184497 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: Ū Name of New Registered Agent: S New Registered Office Address: Enter Florida street address , Florida 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

If Changing Registered Agent, Signature of New 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Aarom Baldiris	2467 Eagle Run Drive	Add
		Weston, FL 33327	Remove
			☐ Change
MGR	Maria Yolanda Soto de Fernandez	2467 Eagle Run Drive	Add
		Weston, FL 33327	Remove
			Change
			Add
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te: If the date inserted in this blument's effective date on the D	ock does not meet the applicable statutory f	or more than 90 days after filing.) Pursuant to 605.020 filing requirements, this date will not be listed as
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	effective data has also as a	(e time at 13,01 a.m. a. )
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record specifies a delayed he 90th day after the rec	ord is filed.	time, at 12:01 a.m. on the earlier of
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,	ord is filed. $\frac{2017}{2017}$	
October 30	is is inco.	e time, at 12:01 a.m. on the earlier o
ed October 30	, 2017	
ed October 30	is is inco.	
ed October 30	, 2017	tive of a member

Filing Fee: \$25.00