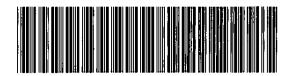
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(Re	equestor's Name)		
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J. BRYAN

OCT -3 2011

EXAMINER

COVER LETTER

Division of Co	rporations		
SUBJECT:	Precious N	Metals Import LLC	
		ited Liability Company	
	f Amendment and fee(s) are sul	_	A SEP 30 PA 1:03
		Cesar E Molina	
		Name of Person	The state of the s
	Pre	cious Metals Import LLC	
		Firm/Company	
	901	Brickell Key Blvd #2808	
		Address	
		Mlami, FL 33131	
		City/State and Zip Code	
	cem@ E-mail address: (preciousmetalsimport.com to be used for future annual report notific	ation)
For further information	concerning this matter, please of	-	,
Cesar Molina		at (305)	216-5103
Name of Person		Area Code & Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ecious Metais import LLC	
(Name of the Limited (A	Liability Company as it now appears Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Li	ability Company were filed on	06/16/2010 and assigned
Florida document numberL10000064		06/16/2010 and assigned
This amendment is submitted to amend the follo	owing:	3 70
A. If amending name, enter the new name of	the limited liability company here	The total of the same of the s
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
	· ·	
	<u> </u>	
Enter new mailing address, if applicable:		
• • •	•	
(Mailing address MAY BE A POST OFFICE I	<u></u>	
B. If amending the registered agent and/oregistered agent and/or the new registered of		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		, Florida
	City	Zin 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 608, 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

f If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Address</u> **Type of Action** <u>Name</u> **MGRM** Elsemarie Molina 901 Brickell Key Blvd #2808 ☐ Add Miami, FL 33131 √ Remove ☐ Add Remove · _ Add ☐ Remove Remove ___Add Remove ☐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary), September 13 Dated ___ Signature of a member or authorized representative of a member Cesar E. Molina

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee