# 108000055984

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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**JUN - 1** 2015

T SCHROEDER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2015

AURELIO TORAL VICARIO 5040 NW 7TH ST #690 MIAMI, FL 33126

SUBJECT: METAL EXPORTS LLC

Ref. Number: L08000055984

We have received your document for METAL EXPORTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Terri J Schroeder Regulatory Specialist II

Letter Number: 515A00010523

# COVER LETTER

TO: Registration S Division of Co		*	
SUBJECT: Meta	al Exports LLC		
SUBJECT:		ited Liability Company	
	ondence concerning this matter	-	
	AURELIO T	ORAL VICAI	RIO
		Name of Person	
	Metal Expor	ts LLC	
		Firm/Company	
	5040 NW 7t	h ST STE 69	90
		Address	
	MIAMI, FL 3	3126	
		City/State and Zip Code	
	sales@imetalexp		
		to be used for future annual re	port nouncation)
	concerning this matter, please c		
Andres Hu	ırtado	$\phantom{00000000000000000000000000000000000$	238932
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	☐ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Metal Exports LLC.

(Name of the Limited	Liability Compa Florida Limited I	ny as it now appears on our records nability Company)	
The Articles of Organization for this Limited Liab Florida document number L08000055984	oility Company	were filed on 06/05/2008	and assigned
This amendment is submitted to amend the follow	•		MAY 2
A. If amending name, enter the new name of t	,	*	9 A
The new name must be distinguishable and end with the wo	ords "Limited Liah		" or the abbreviation CD.L.C."
Enter new principal offices address, if applicab	ole:	C/ Monte Amor 25	<b>一一一一一一一</b>
(Principal office address MUST BE A STREET	ADDRESS)	Urbanizacion Olivar de	Mirabal 📑 🗀
		Boadilla del Monte, Mad	rid 28660, Spain
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE Beauting)  B. If amending the registered agent and/or registered agent and/or the new registered office.	· registered of		
Name of New Registered Agent:	Corporacion	nes USA INC	
New Registered Office Address:	5040 NW 7	th ST STE 690	
Town Rogistered Office / Redress.		Enter Florida street address	
	Miami	, Flo	<sub>rida</sub> 33126
	1	City	Zip Code
New Registered Agent's Signature, if changing Re-	gistered Agent:		<i>:</i> .
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this ch	and complete cred agent as p gistered office	performance of my duties, and rovided for in Chapter 605, F	d I am familiar with and S.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager .uthorized Member	,	
<u>Title</u>	Name	Address	Type of Action
MGR	INGRASSIA, MICHAEL	200 MENTOR DR	Add
		NAPLES, FL 34110	■ Remove
AP_	ECHEVERRIA, ANNETTE	200 MENTOR DR	□ Add
		NAPLES, FL 34110	<b>≘</b> Remove
MGR	TORAL VICARIO, AURELIO	C/ Monte Amor 25	Add
•		Urbanizacion Olivar de Mira	bal 🗆 Remove
		Boadilla del Monte, Madrid 28660, SF	PAIN
			Remove 29 A
			Add O
<del></del>			
			□ Remove

If amending any other infor	mation, enter change(s) here: (Attack	h additional sheets, if necessary.)
	,	,
	•	
	**************************************	
,	-	•
the date this document is filed by the	the date of filing:  cannot be prior to date of receipt or filed date an  e Florida Department of State)	(optional) d cannot be more than 90 days after
Dated MAY 8TH	. 2015	2
	Signature of a member of authorized repre	esentative of a member
AURELIO 1	ORAL VICARIO /	
	Typed or printed name of	A A A A A

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