D9 0000 11637

(Requ	estor's Name)	
(Address)		
(Addre	ess)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates o	of Status
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2009 APR -2 AM 10: 51
SECRETARY OF STATE

T. CLINE APR - 3 2009 EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: MPERIAL METALS LLC (Name of Limited Liability Company)				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
JUSTIN GOLDENBLATT (Name of Person)				
IMPERIAL METALS LLC (Firm/Company)				
16850-112 COLLINS AVE PMB 446 (Address)	2009 APR -2 SECRETAR) TALLAHASSI	71		
SUNNY LISLES BEACH FL 33160 (City/State and Zip Code)	AM IO: 5	C		
For further information concerning this matter, please call:				
USTIN GOLDENBLATT at (514) 402-9575 (Name of Person) (Area Code & Daytime Telephone Number)				

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

□ \$25 Filing Fee

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.50 company submits the following statement in order to chain the State of Florida.			
1. Name of the limited liability company:	IAL METALS LLC		
2. (a) Principal office address of limited liability compar (<u>Note: MUST BE STREET ADDRESS</u>)			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	16850-112 COLLING AVE PMB 446 SUNNY ISLES BEACH FL 33160		
02/02/09 3. Date of filing/registration in Florida	<u>L 0 9 0 0 0 0 11 6 3 7</u> 4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Agent:	HOWARD GOLDENBLATT		
Registered Office Address:	16850-112 COLLING ARE PMB SURNY ISLES BEACH FL 33160		
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:		
NEW Registered Agent:	JUSTIN GOLDENBLATT		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	16850 - 112 COLLINS AVE PMB 446 SUNNY ISLES BEACKFL 33160		
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirme //that the change(s) was/were authorized liability company for as otherwise provided in the articles limited liability company.	et address of the registered office and the business		
(Signature of a member or authorized representative of a member)			
(Printed or typed name of signee)			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the part familiar y lithland accept the obligations of my position F.S. Or, Market becament is being filed to merely reflect a confirm fact the limited liability company has been notified	agree to act in this capacity. I further agree to roper and complete performance of modulies and I in as registered agent as provided for the hapter 608, a change in the registered office address I have by a change in the registered office address I have by		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)

(Signature of Registered Agent)