## L0900067925

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## **COVER LETTER**

	Régistration Division of	n Section Corporations		
~11111FZ		s Design & Fabrication LLC.		
SUBJEC	.l: <u></u>	Name of Lin	nited Liability Company	
		s of Amendment and fee(s) are sub	-	
		Juilo Perez		
			Name of Person	
		stainless design & fabricat	tion	
			Firm/Company	<del></del>
		425 sw 67 ave		
			Address	
		miami florida 33144		
			City/State and Zip Code	
		stainlessdesign@live.com	(to be used for future annual report notific	antion)
For furth	er information	on concerning this matter, please of		eation)
Julio Per	rez		305 458-7749	
	Nar	ne of Person	at ()	Telephone Number
Enclosed	l is a check f	or the following amount:		
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 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 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

Stainless Design & Fabrication LLC.		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	<del></del> ,
he Articles of Organization for this Limited Liability Company	were filed on January 23, 2018	and assigned
orida document number L09000067925		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
e new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:	<del> </del>	
Principal office address MUST BE A STREET ADDRESS)		<u>}-</u> &
		21
nter new mailing address, if applicable:		- r-1
•		<u>්</u> ප
Aailing address MAY BE A POST OFFICE BOX)		- <u>20                                   </u>
		<del>"</del> ~
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	· ·	nter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	ia
- <del></del>	City	Zip 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 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 company has been notified in writing of this change.

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	Ariexis Perez	425 sw 67 ave Miami Fl 33144	Add
			□ Remove
			Change
AMBR	Eduardo Rodriguez	1731 SW 24 terr Miami Fl 33145	<b>=</b> Add
			□ Remove
		<del></del>	Change
			Add
			Remove
			Change
<del></del>			☐ Add
			☐ Remove
			Change
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			□ Change
			Remove
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Effective date, if other than the call an effective date is listed, the date must Note: If the date inserted in this blood occurrent's effective date on the Decider.	be specific and cannot be prior to date		g.) Pursuant to 605.0207
document 3 effective date on the De,		_	
ne record specifies a delayed		effective time, at 12:01 a.m.	on the earlier of
ne record specifies a delayed The 90th day after the reco		effective time, at 12:01 a.m.	on the earlier of
ne record specifies a delayed The 90th day after the reco	ord is filed.		on the earlier of

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Typed or printed name of signee

Filing Fee: \$25.00