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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR - 7 PM 3:00

T. HAMPTON

MAR - 8 2011

EXAMINED

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LUSTROUS METALS, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**ROBERT ROGERS, ESQ.**  
Name of Person

**ROBERT ROGERS LAW FIRM, PA**  
Firm/Company

**2525 PONCE DE LEON BLVD. #1250**  
Address

**CORAL GABLES, FL 33134**  
City/State and Zip Code

**ROBERT.ROGERS@CORALLAW.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ROBERT ROGERS** at ( **786** ) **220-0779**  
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 (additional copy is enclosed)      ☒ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
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

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**(Name of the Limited Liability Company as it now appears on our records.)**  
(A Florida Limited Liability Company)

Page 1 of 2

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

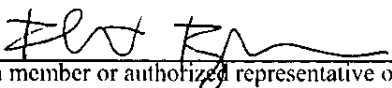
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MATTEO SOLDATINI	1001 BRICKELL BAY DRIVE #2210 MIAMI, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ROBERT SCOTT	80 SW 8TH STREET 20TH FLOOR MIAMI, FL 33130	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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\_\_\_\_\_  
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Dated MARCH 1, 2011

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
ROBERT ROGERS, Registered Agent  
\_\_\_\_\_  
Typed or printed name of signee