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SECRETARY OF STATE DIVISION OF CORPORATIONS

11 MAR - 7 PM 3: 00

T. HAMPTON

MAK - 8 2011

EXAMNED

COVER LETTER

Division of Co	nchorations					
SUBJECT:	LUSTRO	JS METALS, LLC				
Name of Limited Liability Company						
		:,				
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	condence concerning this matte	r to the following:				
	ROBERT ROGERS, ESQ.					
	Name of Person					
	ROBER	ROBERT ROGERS LAW FIRM, PA				
		Firm/Company				
	2525 PONCE DE LEON BLVD. #1250					
		Address				
	COI					
						
	ROBERT.	ROBERT.ROGERS@CORALLAW.COM E-mail address: (to be used for future annual report notification)				
			notification)			
For further information	concerning this matter, please of	call:				
ROE	BERT ROGERS	at (_786)	220-0779			
Name	of Person	Arca Code & D.	aytime 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 enc	losed) Certified	e of Status &		

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 DIVISION OF CORPORATIONS OF

FILED SECRETARY OF STATE

11 MAR -7 PM 3 00

LUSTROUS METALS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 8/13/2010 and assigned The Articles of Organization for this Limited Liability Company were filed on _____ Florida document number _____ L10000085195 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member Title Name **Address Type of Action** MGRM MATTEO SOLDATINI 1001 BRICKELL BAY DRIVE #2210 ✓ Add Remove MIAMI, FL 33131 ROBERT SCOTT MGRM 80 SW 8TH STREET 20TH FLOOR MIAMI, FL 33130.____ ☐ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 1 2011 Dated ____ Signature of a member or authorized representative of a member ROBERT ROGERS, Registered Agent
Typed or printed name of signce

Page 2 of 2

Filing Fee: \$25.00