L110000 37099

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ry/State/Zip/Phone #	¥)		
PICK-UP	WAIT;	MAIL		
(Business Entity Name)				
(Document Number) المرادة (Document Number)				
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TALLAHASSEE, FLOREIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 14, 2014

DAVID LOVE 600 SANDTREE DR STE 200C PALM BEACH GARDENS, FL 33403

SUBJECT: SGM METALS, LLC Ref. Number: L11000037099

We have received your document for SGM METALS, 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):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 514A00022006

COVER LETTER

TO: Registration Section !
Division of Corporations

SGM Metals LLC dba SGM Precious Metals

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:

David Love

Name of Person

SGM Metals LLC dba SGM Precious Metals

Firm/Company

600 sandtree dr ste 200c

Addres

Palm Beach Gardens fl. 33403

City/State and Zip Code

diove@sgmmetals.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Love

_{4,7}888,6026888

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sgm metals lic dba SGM Precious Meta		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L11000037099</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and end with the words "Limited Liab	bility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	SGM Precious Metals LLC	
(Principal office address MUST BE A STREET ADDRESS)	600 Sand Tree Dr STE 210c	
	Palm Beach Gardens FL 33403	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SGM Precious Metals LLC 600 Sand Tree Dr STE 210c Palm Beach Gardens FL 33403 (2)	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address: Alm 3.		
	•	

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

Page 1 of 3

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 $AMBR = A$	MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
		 	□ Remove		
			Add		
			Remove		
					
			□ Remove		
			SECRETA ALLAHAS		
			SS Remove Remove Remove Add		
					
			Remove		
			Add		
		-	□ Remove		

D.	If am	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	-			
	•			
E.	Effect	tive date, if other than the	date of filing:	(optional)
		ective date must be specific, canr te this document is filed by the Fl	not be prior to date of receipt or filed date and cannot b orida Department of State)	e more than 90 days after
	Dated	10/06	2014	
	Duice	Davie	Houp	
		<i>-</i> -	Signature of a member or authorized representative	of a member
		David Love	Typed or printed name of signee	
			. , pea c. printed name of orginee	

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE