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## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	The G.Stee	El Group LL ited Liability Company	<u></u>	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	The G. 18851 NE	Name of Person  Steel Grouper Firm/Company  29th ave st	P. U.C. uite-905	TAPR-9 TH 8 29
	Avertura  GStee  E-mail address: (1)	FL 33180  City/State and Zip Code  LOTHE-Stee  to be used for future annual report notifica	<u>le-gr</u> oup.	com
For further information c	concerning this matter, please c	all:		
Goldi Name o	Steel of Person	at ( <u>95)4. 600</u> Area Code & Daytime T	· 9718 Celephone Number	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is e	
MAILING ADDRESS:		STREET/COURIE	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp.	any as it now appears on our r	records.)	
(Name of the Limited Liability Comp. (A Florida Limited	Liability Company)	<del>,</del> ,	
The Articles of Organization for this Limited Liability Compan		11,2012 and assigned	
Florida document number <u>L12000629</u> .40	02		
This amendment is submitted to amend the following:			
_			
A. If amending name, enter the new name of the limited lia	bility company here:		
	nic	<u>ኒ</u>	
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the do	esignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	na	<b>1 1 1 1 1 1 1 1 1 1</b>	
(Principal office address MUST BE A STREET ADDRESS)		- SON	
		10 927	
Enter new mailing address, if applicable:	na	90 × 5	
(Mailing address MAY BE A POST OFFICE BOX)		N = 17.	
		.,	
B. If amending the registered agent and/or registered o	ffice address on our recor	ds, enter the name of the new	
registered agent and/or the new registered office address her	<u>re</u> :	, , , , , , , , , , , , , , , , , , , ,	
	-1-		
Name of New Registered Agent:	na		
New Registered Office Address:	·	<u>-</u>	
	Enter Florida street address		
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and agi	ree to act in this capacity 1	further agree to comply with	
the provisions of all statutes relative to the proper and comp	plete performance of my dut	ies, and I am familiar with and	
accept the obligations of my position as registered agent as	provided for in Chapter 608	8, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

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 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 <u>Title</u> <u>Name</u> Address Type of Action □Add Remove □ Add Remove  $\square$  Add Remove 18851 NE 29th ave # 905 Add Remove MGRM Pablo Hartini □Add Remove □Add Remove **D.** If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \* Adding Pablo Martini as a Hanaging Hember Signature of a member or authorized representative of a member Old Steel
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00