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| PICK-UP | MAIT WAIT | MAIL |
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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Pan Atlantic Metal Consulting, 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: |
| Scott Greenberg Name of Person |
| Firm/Company |
| 318 Mane Cl. |
| Tarpon Springs FL 34688 City/State and Zip Code GR 8 Mo to rs & G Mail. Com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Scott Greenberg at 727, 452-1000 55 Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee Certificate of Status C |

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

| PAN ATLANTIC M | ETAL CONSULTING, LLC |
|--|--|
| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now appears on our records. Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 13 0000 30 688</u> . | were filed on $\frac{2/27/13}{}$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | oility company here: |
| SG Metal T | rading, LLC |
| The new name must be distinguishable and end with the words "LimitL.L.C." | ited Liability Company," the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRESS) | 20 |
| | - 생 교 기계 - 1 |
| | F 5 |
| Enter new mailing address, if applicable: | होता ज |
| (Mailing address MAY BE A POST OFFICE BOX) | 7 7 |
| | |
| | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | , Florida |
| | 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 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 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> **Address Type of Action** Add Remove Add Remove Add Remove Add Remove တ္သ Add Remove Add Remove

| ······································ |
|--|
| |
| 8/7 , 2013 . D 11 |
| Signature of a member or authorized representative of a member |
| Scott Greenberg Typed or printed name of signee |
| |

Filing Fee: \$25.00

2013 AUS 15 AM 8: 45