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(Re	questor's Name)	
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# **COVER LETTER**

Division of Cor	porations		
	ternational Group LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fec(s) are sub		
r lease retuin an correspo	machee concerning and matter	to the following.	
	Iymen Armoush		
		Name of Person	<del></del>
	ARMCO International Gro	up LLC	
		Firm/Company	
	5314 burchette rd.		
		Address .	<del></del>
	Tampa, FL 33647		
		City/State and Zip Code	
	waficarmoush@hotmail.cor		A 70 70 70 70 70 70 70 70 70 70 70 70 70
For further information c	E-mail address: (	to be used for future annual report notifica	AHETARY OF A PROPERTY OF A PRO
Iymen Armoush		813 3946303 at ()	
Name o	f Person		elephone Number 2
\$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:

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 OF

Armco International Group LLC						
(Name of the Lin	ited Liability Compa (A Florida Limited	any as it now appears on our records. Liability Company)	,)			
The Articles of Organization for this Limited	Liability Company	were filed on 08/27/2013	and assigned			
Florida document number L13000121301	,					
This amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."			
Enter new principal offices address, if appli	icable:	5314 burchette rd. Tampa, FL 33647				
Principal office address MUST BE A STRE	ET ADDRESS)		<u> </u>			
Enter new mailing address, if applicable:		5314 burchette rd. Tampa, FL 33	3647			
Mailing address MAY BE A POST OFFICE	E BOY		<del></del> ,			
B. If amending the registered agent and egistered agent and/or the new registered of			enter the name of the			
Name of New Registered Agent:			<b>の</b> 戸			
New Registered Office Address:	5314 burchette	rd.  Enter Florida street address				
	Tampa	, Flor				
		City	200 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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Iymen Armoush	5314 burchette rd. Tampa, FL 3364	<b>=</b> Add
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