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## **COVER LETTER**

TO:

TO: Registration S Division of Co				
SUBJECT:	Steel Standin	na LLC		
SUBJECT:	Steel Standing Name of Lim	ited Liability Company		
The enclosed Articles of	f Amendment and fec(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Mic	Name of Person		
	St	Cel Standing LLC Firm/Company	<del></del>	
	83.	75 Huzelgove Ct. Address	<del></del>	
		Navaere, FL 305106 City/State and Zip Code	<u> </u>	
	S+L . E-mail address: (	Stand Daymail. Com	ification)	
For further information	concerning this matter, please c	all:		
	rael Ladouceur	at ( <u>1003</u> ) <u>231, 90</u> Area Code Daytin	038	
Name	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for	the following amount:			
S25.00 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)	
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se		
Division of Corporations		Division of Cor	_	
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Steel Standing LLC
(Name of the Limited Liability Company as if now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on <u>OA 07 2015</u> and assigned Florida document number <u>LI 50000 60572</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
he new name must be distinguishable and contain 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)
<del></del>
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of the new register
ngent and/or the new registered office address here:
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:
New Registered Agent's Signature, if changing Registered Agent:
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	Francis J. Gaetani	114 Park Pl. Panama City, FL 32504	□ Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□ Add
			□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

an effect lote: If	e date, if other than the date of filing:
record s l is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	October 21, 2021.
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00