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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	O PPD	ETALS, LLC		
SUBJE	JI:	Name of Lin	ited Liability Company	
		Amendment and fee(s) are sub		
Please re	turn all correspo	endence concerning this matter	to the following:	
		MARLENE SANCHEZ		
			Name of Person	
		MMS CORPORATE SER	VICES	
		•	Firm/Company	
		1451 W. CYPRESS CREE	K RD, STE 300	
		- 11 Marie	Address	· · · · · · · · · · · · · · · · · · ·
		FORT LAUDERDALE, FI	L 33309	
		ogsasuppliers@gmail.com	City/State and Zip Code	
		,	to be used for future annual report noti	fication)
For furth	er information co	oncerning this matter, please ca	all:	
MARLE	NE SANCHEZ		at (954) 673-	3566
•	Name o	Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	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)
	MAILI	NG ADDRESS:	STREET/COURI	ER 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

GENCO METALS, LLLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on o Liability Company)	ur records.)		
The Articles of Organization for this Limited Florida document number	Liability Company	were filed on	and assigned		
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	cable:	1315 NW 98TH CT, U	JNIT 9		
(Principal office address MUST BE A STREET ADDRES		DORAL, FL 33172			
Enter new mailing address, if applicable:		1315 NW 98TH CT, UNIT 9			
Mailing address MAY BE A POST OFFICE	BOX)	DORAL, FL 33172			
3. If amending the registered agent and registered agent and/or the new registered o			records, enter the name of the		
Name of New Registered Agent:		TAL PARTNERS, LLC			
	1315 NW 98TH				
New Registered Office Address:	Enter Florida street address				
	DORAL		, 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 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.

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>	<u>Address</u>	Type of Action
AP	MMS Corporate Services	841 SW 71'H STREET S8	
		DOMBINO DE LE COMPANIO	Add
		POMPANO BEACH, FL 33060	Remove
			□ Change
MGR	Genco Capital Partners, LLC	1315 NW 98TH CT, UNIT 9	■ Add
		DORAL, FL 33172	☐ Remove
			Change
***			Add
			☐ Remove
			☐ Change
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Effec	tive date, if oth	er than the da	te of filing:				(optiona	ıl)	
lf an e Note:	flective date is liste If the date inser	d, the date must be ted in this block	specific and o does not me	cannot be prior eet the applic	cable statutory	g or more than filing require	90 days after fili ements, this da	ng.) Pursuant to 6 te will not be li	05.0207 sted as
docur	nent's effective of	late on the Depai	tment of Sta	ate's records					
ne re	ecord specifies	a delaved ef	fective da	ate, but no	ot an effect	ive time, a	t 12:01 a.m	. on the ear	lier of
The	e 90th day af	er the record	is filed.	-,					
		MA	Y IST	2016					
Dated	d		,						
	(-0)	Nitroff							

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00