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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL.
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

	Registration Se Division of Cor			
cupic		ETAL RECYCLING LLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		David Bauer		
			Name of Person	
		The Bauer Law Office P.A	۸.	
•			Firm/Company	
		814 Ponce de Leon Blvd.,	Suite 210	
			Address	
		Coral Gables, FL 33134		
			City/State and Zip Code	
		david@bauerlawpa.com	12.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	
			to be used for future annual report notif	reation)
For furth	er information co	oncerning this matter, please co	all:	
David B	auer		305 712-79 7 9	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e following amount:		
\$25.6	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:

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

CRUSH METAL RECYCLING LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our reco a Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability C	Company were filed on 05/24/2018	and assigned
Florida document number L18000130369	<u>_</u> .	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	전성 18
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LI	C" or the abbreviation J.L.C. 181
Not as a supplied to the Office and decree of conditional and		
nter new principal offices address, if applicable:		11. 0-
<u> Principal office address MUST BE A STREET ADDR</u>	<u> </u>	
		<u> </u>
		<u> </u>
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
duling marcss MATT BE ATTOST OF THE BON		
	·	•
. If amending the registered agent and/or regis	tamed office address on our mason	de antou the nume of the s
egistered agent and/or the new registered office add		us, enter the name of the i
Name of Name Day Statement Assessed		
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
-	Enter Florida street addi	ress
	_1	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.

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

Title	Name	<u>Address</u>	Type of Action
MGR	312 STRENGTH CORP	814 Ponce de Leon Blvd. Suite 219	
		Coral Gables, FL 33134	Remove
			Change
MGR	Angel Fernandez, Jr.	814 Ponce de Leon Blvd. Suite 219	A dd
		Coral Gables, FL 33134	Remove
			Change
			□ Remove
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If an eff <u>Note:</u> docum	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	d as the
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Filing Fee: \$25.00