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SECRETARY OF STAFE DIVISION OF CORPORATION

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COVER LETTER

TO: Registration Section , Division of Corporations
SUBJECT: METAL CONVERTIBILITY CMCON 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:
ALBERTO M. GROSS Name of Person
Firm/Company
2625 COLLINS AVE. #1806
2625 COLLINS AVE. #1806
MIAMI BEACH, FL 33140
MIAMI BEACH, FL 33140 City/State and Zip Code METAL CONVERT LLC @ gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ALBERTO M. GROSS at 305 878-2076 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

METAL CONVERTIBILITY (MCON) LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JULY | 5 | 2018 and assigned Florida document number L 18000 162748 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The 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: 2625 COLLINS AVE. #1806 (Principal office address MUST BE A STREET ADDRESS) MIAMI BEACH, FL 33/40 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 2625 COLLINS AVE. #1806

Enter Florida street address

MIAMI BEACH, Florida 33140

City Zip Code New Registered Office Address:

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	Address	Type of Action
MGR)	ALBERTO GROSS		🗆 Add
			Remove
			Change
			🗖 Add
			Remove
			Change
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ffective date, if other than the date of f	filing:		(optional)	
Tective date, if other than the date of f an effective date is listed, the date must be specifi- ote: If the date inserted in this block does not becoment's effective date on the Department	ic and cannot be prior to not meet the applicable	le statutory filing req	an 90 days after filing.)	Pursuant to 605.02 will not be listed
e record specifies a delayed effective. The 90th day after the record is fil		an effective time	, at 12:01 a.m. (on the earlier
ated July 12			1	
Signature	of a member or authoriz	red representative of a	nember	
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Page 3 of 3

Filing Fee: \$25.00