L18000 194720

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer: OK to INSect P5-2- Par A. Estevez 9/24/18 MA

Office Use Only



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08/27/18--01937--016 **35.00

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September 4, 2018

TOMAS RODRIGUEZ 8996 NW 105TH WAY MEDLEY, FL 33178

SUBJECT: DUCT METAL SHOP LLC

Ref. Number: L18000194720

We have received your document for DUCT METAL SHOP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan Senior Section Administrator

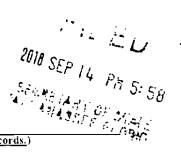
Letter

Letter Number: 218A00018270

COVER LETTER

	ision of Cor			
CHD (CAT)		TAL SHOP LLC		
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please returi	all correspo	ndence concerning this matter	to the following:	
		TOMAS RODRIGUEZ		
			Name of Person	
		8996 NW 105TH WAY	Firm/Company	
		MEDLEY,FL.33178	Address	
		ACOSTAESTEVEZACCI	-	
For further i	nformation c	E-mail address: (oncerning this matter, please ca	to be used for future annual report no all:	tification)
TOMAS R	ODRIGUEZ		786 718-0968	
	Name o	f Person	at () Area Code Daytii	me Telephone Number
Enclosed is:	a check for tl	ne following amount:		
■ \$25.00 I	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)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



DUCT METAL SHOP 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	y were filed on MIAMI,F	FLORIDA	and assigned
Florida document number L180000194720			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designa	tion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	8996 NW 105TH W.	AY, MEDLEY, FLO	ORIDA,33178
(Principal office address MUST BE A STREET ADDRESS)			
			
Enter new mailing address, if applicable:	8996 NW 105TH W.	AY,MEDLEY,FLO	RIDA,33178
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		records, enter t	he name of the n
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		Florida	Zip Code
			Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and ag	ree to act in this capac	city. I further agre	re to comply with

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Change
			□ Add
			Remove
			Change
		-	Remove
			Change
			Change
			Add
			□ Remove
			Change
			Remove
			Change

08/14/2018	Note:	Tective date, if other than the date of filling: [Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date whent's effective date on the Department of State's records.	Pursuant to (fill not be l	505.0207 isted as	(3)(b) the
	E. Effec	08/14/2018 tive date, if other than the date of filing:	Pursuant to C	505.0207	(3)(b)
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Filing Fee: \$25.00