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COVER LETTER

TO: Registration Section Division of Corporations

STEELGARDE, 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:

William Manning

Name of Person

STEELGARDE, LLC

Firm/Company

1132 Kane Concourse, Ste.200

Address

Bay Harbor Islands, FL 33154

City/State and Zip Code

support@pointecompanies.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call;

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)

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

STEELGARDE, 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 <u>11/27/2018</u> and assigned Florida document number <u>L18000274025</u>.

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:	
(Principal office address MUST BE A STREET ADDRESS)	
	ω —;
	-0
Enter new mailing address, if applicable:	ب بب
(Mailing address MAY BE A POST OFFICE BOX)	دن ،

B. If amending the registered agent and/or registered office address on our records, <u>enter_the_name_of_the_new</u> registered agent and/or the new registered office address here:

	, Fl	lorida Ziv Code
	Enter Florida street addre.	XX
New Registered Office Address:		
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·

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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

•

MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	<u>Name</u> Abraham Levy Hop	Address 1132 Kane Concourse, Ste.200	Type of Action
MGR		Bay Harbor Islands, FL 33154	🗌 Add
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If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
Change spelling of last name from "Hom" to "Hop"	
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If the record 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 record is filed.

Dated December 2018 Signature of a member or authorized representative of a member Maurice Egozi Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00