L190000	59111	
(Address) (Address) (City/State/Zip/Phone #)	800387940308 RECEIVED MAY 23 2011 05/24/220100200	5 ++25.
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	2022 HAY 23 AMII: 48 SEUTE DARY OF STALE TALL AHASSEE, FL	7
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COVER LETTER

TO: Registration Section Division of Corporations

Linea Rossa LLC

SUBJECT: _

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:

Julie B Hershman

Name of Person

Julie B Hershman CPA PA

Firm/Company

2240 Palm Beach Lakes Blvd #101

Address

West Palm Beach, FL 33409

City/State and Zip Code

Julie@JBHershmanpa.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:

🖀 \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

ARTICLES	OF AMENDMENT TO	
ARTICLES	OF ORGANIZATION OF	FILED
Linea Rossa, LLC		2022 MAY 23 AM 11: 41
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our record imited Liability Company)	TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Con Florida document number <u>L19000059111</u>	mpany were filed on February 28, 2019) and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limite</u>	ed liability company here:	
The new name must be distinguishable and contain the words "Limite Enter new principal offices address, if applicable:	ed Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Principal office address MUST BE A STREET ADDRE	<u></u>	· · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	ð
	. Flo	orida
	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.

It 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>	Name	Address	Type of Action
MGR	Naci Gul	7501 E Treasure Drive	🗆 Add
		7M North Bay Village	
		Miami. FL 33141	□Change
MGR	Mustafa Gul	7501 E Treasure Drive	□Add
		7M North Bay Village	Remove
		Miami, FL 33141	
MGR	Beymetal Aluminyum San.ve Tic.Ltd.Sti.	Kemalpasa OSB Mahallesi 21. Sokak	⊇enange
		No: 5/1 Ulucak. Kemalpasa	
		Izmir, Turkey	
			□Change
			🖸 Add
			🗌 Remove
			🗋 Change
			🖸 Add
			🗆 Remove
			□Change
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			□Remove
			□Change

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May 16 Dated	2022
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	$\langle \gamma \gamma \gamma \gamma \eta \eta \rangle / \gamma$
	Signature of a member of a supervised representative of a member
Erhan Arda Azman	fur /
	Typed or printed name of signee