10/3/2019

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190002946513)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:		
	Division of Cor	
	Fax Number	: (850)617-6383
From:		
	Account Name	: LEGALZOOM.COM INC.
	Account Number	: 120010000062
	Phone	: (323)962-8600
	Fax Number	: (323)962-3889
*Enter an	the email addres nual report maili	s for this business entity to be used for future ngs. Enter only one email address please.**
Ęл	ail Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRECISION METAL TURNING LLC

Certificate of Status	0
Certified Copy	
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

T GLASS

OCT 0 4 2019

COVER LETTER

TO: Registra Division		tion orations		
		METAL TURNING LLC		
SUBJECT:		Name of Limit	ted Liability Company	
The enclosed Arti	icles of /	Amendment and fee(s) are subr	nitted for filing.	
Please return all c	orrespor	ndence concerning this matter t	o the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, inc.		<i>~</i> ;
			Firm Company	<u> </u>
		101 N Brand Blvd 11th Ft		00000000000000000000000000000000
			Address	၊ '
		Glendale, CA 91203		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	ph 10
		dearoli@precisionmetaltum		
			o be used for future annual report notifi	ication)
For further infoo	nation co	meening this matter, please or	all:	
Cheyenne Mose	ley		800 773-0888	
	Name o	l'Person	at () Area Code Daytime	Telephone Number
Enclosed is a che	eck for th	ne following amount:		
□ \$25.00 Filing		☐ \$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)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, 11, 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Ce Tallahassee, Fl. 32	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	ny a <u>s it now appears on our records.</u>) , ability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000228358</u>	were filed on 09/10/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	hty Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5360 Melutosh Point #122	
(Principal office address MUST BE A STREET ADDRESS)	Sanford, FL 32773	
r	5360 McIntosh Point #122	
Enter new mailing address, if applicable:	Sanford, FL 32773	
(Mailing address MAY BE A POST OFFICE BOX)		11 12 t
		• • • • • • • • • • • • • • • • • • • •
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our records, <u>en</u> <u>re</u> :	ter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Floridastreet address	
	, Florida	ZipCode
	City	дірське
New Registered Agent's Signature, if changing Registered Agent		ا. ا.
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my auties, and i i provided for in Chapter 605, F.S.	Or, if this document is

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

<u> Fitle</u>	Nanie	Address	Type of Action
AMBR	Daniel Ghiraldini De Caroli	5360 MeIntosh Point #122	
		Sanford, FL 32773	□ Remove
			■ Change
	<u> </u>		
			□ Remove
			Change
			 Aqd
			□ Rēmove ·
			Change
			Add
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
			☐ Remove
			☐ Change

Page 3 of 3
Filing Fee: \$25.00