

L20000020712

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FOREING SOLUTION
Account Number : I20200000036
Phone : (786)599-4140
Fax Number : (954)827-2771

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Karrettoclaudia@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARTIGAS MANAGEMENT LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

2021 AUG 17 AM 8:57

STATE OF FLORIDA
ALLAHASSEE, FLORIDA

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ALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ARTIGAS MANAGEMENT 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:

ADOLFO GARGIULO

Name of Person

ARTIGAS MANAGEMENT LLC

Firm/Company

7300 W MC NAB ROAD SUITE 220

Address

TAMARAC, FL, 33321

City/State and Zip Code

adolfo@deltabm.com

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

For further information concerning this matter, please call:

Adolfo Gargiulo

754

234-8689

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 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

ARTIGAS MANAGEMENT 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 January 14th 2021 and assigned Florida document number L20000020712.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Paukas Stainless Steel LLC

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:

2240 Van Buren St. #A4

(Principal office address MUST BE A STREET ADDRESS)

Hollywood, FL 33020

Enter new mailing address, if applicable:

2240 Van Buren St. #A4

(Mailing address MAY BE A POST OFFICE BOX)

Hollywood, FL 33020

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:

Kareen Gutierrez

New Registered Office Address:

2240 Van Buren St. #A4

Enter Florida street address

Hollywood

City

Florida

33020

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.

Kareen Gutierrez

If Changing Registered Agent, Signature of New Registered Agent

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AUG 17 PM 1:29
STATE OF FLORIDA
HALL COUNTY
CLERK OF THE CIRCUIT COURT

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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	Adolfo Gargiulo	7300 W McNab Road Suite 220	☐ Add
		Tamarac, FL, 33321	☒ Remove
			☐ Change
Mgr	Kareen Gutierrez	2240 Van Buren St. #A4	☒ Add
		Hollywood, FL, 33020	☐ Remove
			☐ Change
AMBR	William Gutierrez	2240 Van Buren St. #A4	☒ Add
		Hollywood, FL, 33020	☐ Remove
			☐ Change
AMBR	Claudia Carretto	2240 Van Buren St. #A4	☒ Add
		Hollywood, FL, 33020	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 August 19th, 2021

Kareen Gutierrez

Signature of a member or authorized representative of a member

Kareen Gutierrez

Typed or printed name of signee

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STC
FALLMASSSEE PL
12

Filing Fee: \$25.00