L2000108847

(Re	questor's Name)	
(,,,=		
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	2 #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	





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C. GOLDEN SEP 2 5 2020

CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		PICK U	UP: 09/24/2020
		CERTIFIED COPY	
	хх	РНОТОСОРУ	<u> </u>
		CUS	
	хx	FILING	LLC AMENDMENT
1.		OB STEEL LLC	
		(CORPORATE NAME AND DOCUME	NT#)
2.			
		(CORPORATE NAME AND DOCUME	NT #)
3.			
		(CORPORATE NAME AND DOCUME	NT #)
4.			
		(CORPORATE NAME AND DOCUME	NT#)
5.			
		(CORPORATE NAME AND DOCUME	NT #)
6.			
		(CORPORATE NAME AND DOCUME	NT#)
	CIA TRU	L ICTIONS:	

COVER LETTER

	ion Section of Corporations		
SUBJECT:	OB Steel, LLC		
	OB Steel, CLC Name of L	imited Liability Company	
The enclosed Articl	es of Amendment and fee(s) are s	ubmitted for filing.	
Please return all con	respondence concerning this matt	er to the following:	
	MaH	Name of Person	
1			
		Steel, LLC Firm/Company	
	938	Plane And Ste 67119 Address	
		Address	
1	New Yo	City/State and Zip Code	
1		City/State and Zip Code	<u> </u>
	F-mail address:	(to be used for future annual report not	
i for further informati	on concerning this matter, please	calls	ification)
İ		CMIT:	
Matt o'	bnen	at (610 , 805 4	967
Na	me of Person	at (60) 805 4 Area Code Daytim	ne Telephone Number
Enclosed is a check f	or the following amount:		
S25.00 Filing Fe		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
M.A	ALLING ADDRESS:	STUVETICOUP	

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

OB Stee		2000 (- 26	P'' 3: IN
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on da Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability	Company were filed on April	21, 2020	_ and assigned
Florida document number <u>L20000108847</u>	_ ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the design	nation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		r records, <u>enter th</u>	e name of the n
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida s	troot addrace	
	imer Fioriau s		
	City	Florida	Zip Code
	•		1

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

or removed	Authorized rerson(s) authorized to in from our records:	manage, enter the title, name, and address of cac	ch person being add
MGR = M			
<u>Fitle</u>	Name	Address	Type of Action
MGR	Frank A. Bergin	aar lanc Aves Ste 67119	
		New York, NY 10003-1708	🗆 Add
			PRemove
			Change
1			Remove
			□ Change
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•	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effer Note: I	ve date, if other than the date of filing: S
the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o 90th day after the record is filed.
Dated _	9/23/20 Signature of a member or authorized representative of a member Muthew o' longer
	Signature of a member or authorized representative of a member
	muther o'bren

Page 3 of 3

Filing Fee: \$25.00