LZO 000127825

(Requ	uestor's Name)	
(Adda	ress)	
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(City/	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

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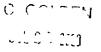
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5650 No. - 6 Mil 10: 17



COVER LETTER

TO:	Registration S Division of Co			
eun ir		AL DESIGN LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all corresp	ondence concerning this matter	to the following:	
		GEORGE MERCADO-V	ALE	
			Name of Person	
		GM METAL DESIGN LL	С	
			Firm/Company	
		4041 SW JAQUST ST		
			Address	
		PORT ST LUCIE, FL 34	953	
			City/State and Zip Code	
		ARTEFORJADO10@YAI		
			to be used for future annual report notif	lication)
For furt	her information	concerning this matter, please c	all:	
GEOR	GE MERCADO)	787 214-6016	
	Name	of Person	at () Area Code Daytime	e Telephone Number
Enclose	d is a check for t	the following amount:		
■ \$25	.00 Filing Fee	S30.00 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 Addre	Section	Street Address: Registration Sec	
	Division of C P.O. Box 63	· · · · · · · · · · · · · · · · · · ·	Division of Cor The Centre of T	•
	Tallahassee,			e Street, Suite 810

Tallahassee, FL 32303



Letter Number: 920A00012427

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 23, 2020

GEORGE MERCADO-VALE 4041 SW JAQUST STREET PORT ST LUCIE, FL 34953

SUBJECT: GM METAL DESIGN LLC

Ref. Number: L20000127825

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GM METAL DESIGN LLC

2520.85 -6 AH 10: 17

(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 Liab Florida document number L20000127825	bility Company	were filed on <u>05/12/20</u> 2	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	<u>he limițed liabi</u>	lity company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liabili	ity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:	4041 SW JAQUST S	Т
(Principal office address MUST BE A STREET		PORT ST LUCIE, FL	34953
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office		4041 SW JAQUST ST PORT ST LUCIE, FL 34953	
agent and/or the new registered office address	•		
Name of New Registered Agent:	GEORGE MER	RCADO-VALE	
New Registered Office Address:	4041 SW JAQUST ST Enter Florida street address		et address
	PORT ST LUC	City	Florida 34653 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.

Changing Registered Agent, Signature of New Registered Agen

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>	Address	Type of Action
MGR	GEORGE MERCADO	4041 SW JAQUST ST	□Add
		PORT ST LUCIE, FL 34953	≅ Remove
			□Change
MGR	GEORGE MERCADO-VALE	4041 SW JAQUST ST	■Add
		PORT ST LUCIE. FL 34953	□Remove
			Change
MGR	YARIDZA SOSA	4041 SW JAQUST ST	
		PORT ST LUCIE, FL 34953	■Remove
MGR	GR YARIDZA SOSA-GARCIA	4041 SW JAQUST ST	≣ Add
		PORT ST LUCIE, FL 34953	□ Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change

				
				
				
				
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			±	
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	be specific and cannot be		more than 90 days after	filing.) Pursuant to 605.0207
an effective date is listed, the date must			ing requirements, thi	s date will not be listed as
		oras.		
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Filing Fee: \$25.00