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COVER LETTER

TO:	Registration Solution of Con					
CUDIE		EL HOUSE LLC				
SUBJECT: Name of Limited Liability Company						
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		LOURDES RAFAELA GARCIA				
			Name of Person			
		ABA STEEL HOUSE LLC				
			Firm/Company			
		4370 NW 93RD DORAL	CT			
			Address			
		DORAL, FL 33178				
		_	City/State and Zip Code			
		lourdesg05@aol.com	to be used for future annual report notif	Gnation)		
For furtl	her information o	concerning this matter, please c		icaron		
LOURDES RAFAELA GARCIA			305 776-6106			
Name of Person		at () Area Code Daytime	e Telephone Number			
Enclose	d is a check for t	he 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		Street Address: Registration Sec	ction			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABA STEEL HOUSE LLC	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were f	iled on JULY 23, 2020 and assigned
Torida document number L20000217483	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability co	ompany here:
AH ABA HOUSE STEEL LLC	
he new name must be distinguishable and contain the words "Limited Liability Com	ipany," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	- - - -
	7 (C) 9 (C)
nter new mailing address, if applicable:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office addres	s on our records, enter the name of the new registe
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	r,nier r ioriaa sireei aauress
	Florida
Cu	

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 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
			□Add
			☐ Remove
			Change
			
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□ Remove
			Change
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: FEBRUARY 12, 2024 (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. -Signature of a member or authorized representative of a member LOURDÉS RAFAELA GARCIA

Typed or printed name of signee