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(Re	questor's Name)	· ,
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(Cit	y/State/Zip/Phone	÷ #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
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10/13/20--01013--004 **25.00



COVER LETTER

	Registration S Division of Co				
0110106		uminum LLC			
SUBJEC	T:	Name of Lin	nited Liability Company		
The encle	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	um all correspo	ondence concerning this matter	to the following:		
		RANDY CARUSO			
			Name of Person		
		 	Firm/Company	<u> </u>	
		1965 WHEELER RD			
			Address		
		N PALM BEACH FL 334	80		
			City/State and Zip Code		
		E-mail address. (to be used for future annual report no	otification)	
For furthe	r information c	concerning this matter, please c	all:		
			at ()	ime Telephone Number	
	Name o	of Person	Area Code Dayt	ine Telephone Number	
Enclosed	is a check for th	he following amount:			
\$25.0	0 Filmg 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)	
	Jailing Addres		Street Address:		
Registration Section Division of Corporations		-	Registration Section Division of Corporations		
	P.O. Box 632		The Centre of	The Centre of Tallahassee	
T	allahassee, l	FL 32314	2415 N. Moni	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. - - - 5:18

CARUSO ALUMINUM 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 $\frac{7/24/20}{2}$ and assigned Florida document number ______L20000218390 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address __. Florida ___ Cuv

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

'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	ALBERT PASSAVANTI	15908 75th Ave N	≣ ∆dd
		Palm Beach Gardens, FL 33418	□Remove
			□Change
			□Add
		·	□Remove
			□Change
		 	□Remove
			☐ Change
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			□Remove
			☐ Change
			
			□Remove
			□Change
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			□Change

			
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Note: If the date inserted in	n the date of filing: the must be specific and cannot be prior to his block does not meet the applicabilithe Department of State's records.	date of filing or more than 90 days	ptional) after filing.) Pursumt to 605.0207 (3 this date will not be listed as th
ne record specifies a delayed e ord is filed.	fective date, but not an effective time	e, at 12:01 a.m. on the earlier of	(b) The 90th day after the
Dated 10/5	2020		
Dancti		- ·	
(-7/-	Signature of a member or authori:	zed representative of a member	
	Joignately of a memory of authori		
RANDY CARUS			

Filing Fee: \$25.00