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COVER LETTER

	Registration Section Division of Corpor	rations	^	
SUBJEC	т:	American.	Patriot Meta	16266
The enclo	sed Articles of Am	nendment and fee(s) are sub-	mitted for filing.	
Please ret	um all corresponde	ence concerning this matter	to the following:	
		Mathew	Delanie/levre Name of Person	<u></u>
			Firm/Company	<u></u>
		830 HAMPTU	V Crussing WAJ	
		ST. AVGUS	72NE, FC 3209	72
	-	delam 200	TZNE, F.L. 3209 City/State and Zip Code 22 D Jahoo. COM to be used for future annual report notific	ation)
For furthe	r information conc	erning this matter, please ca		
			at (<u>904)</u> 679- Area Code Daytime	9432 Telephone Number
Enclosed	is a check for the f	ollowing amount:		,
□ \$25.0	0 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:	etion	Street Address:	ion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

American Patrict Metal LC

(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 8/21/2020 and ass Florida document number 2.2000 258 919.	igned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	- 11
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	بج <u>ــــ</u>
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 agent and/or the new registered office address here:	registered
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address: Enter Florida street address	
City , Florida, Florida	

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
Mar	Rola K. DeLamielleure	830 HAMP TON Cross ING WAY	🗆 Add
		ST. AUGUSTINE, FL 32092	XRemove
			□Change
MGR	Mathew J. DeLamiellevie	830 Hampton Coussing Way	Add
		ST AUGUSTINE, FL 32092	Remove
		830 HAMPTON CLUSSING WAY ST. ANGUSTINE, FL 32092	— Dehange
			□ Add
			□Remove
			□Change
			□Add
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If amending										0	
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e record spec d is filed.	ifies a delaye	d effective date	e, but not ar	ı effective tir	me, at 12:01	a.m. on t	he earlier	of: (b) T1	he 90th o	day after	the
Dated	Asher	30) 	2020	_· 5 . <i>l</i> (OD.			
- - /	Malle	30 1. De Jan Signi	ature of a me	mber or autho	rized represer	tative of	meell member	//e			
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