## L21000025673

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bo	usiness Entity Name)	
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Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

P.O. Box 6327

Tallahassee, FL 32314

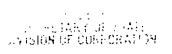
TO: Registration Solution of Col			
SUBJECT: M	TRO MAR-	T INTERNATI	DNAL LLC
30bJEC1		ited Liability Company	
	·	_	
	closed Articles of Amendment and fee(s) are submitted for filing.  SHARON G. McCullars Pres.  Name of Person  METRO MART INTER NATIONAL LLC  Firm Company  53/2 WHITEWAY DRIVE  Address  TEMPLE TERRACE FLA. 336/7  City/State and Zip Code  WESTSHORE METROMART@ GMAIL. Com  E-mail address: (to be used for future annual report notification)  ther information concerning this matter, please call:  Name of Person  Area Code  Daytime Telephone Number		
	METRO MAR	T INTER NATION	AL LLC
	5312 WH	HITEWAY DRIV	<u>E</u>
	TEMPLE TERM	RACE FLA. 336 CityState and Zin Code	.17
		•	
For further information of	concerning this matter, please ex	all:	
SHARON G. M	CCULLARS of Person	at ( <b>813</b> ) 900 Area Code Daytim	e Telephone Number
Enclosed 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)
<u>Mailing Addre</u> Registration Division of C	Section	<u>Street Address:</u> Registration Se Division of Cor	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



21 MAR 26 PH 2: 27

## METRO MART INTERNATIONAL 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 v	vere filed on Ol/1	/2021 and as	signed
Florida document number <u>L 21000025673</u>	<i></i>	7	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designatio	n "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)			<del></del>
			<del></del>
B. If amending the registered agent and/or registered office ac	idress on our records,	enter the name of the ne	w registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
			<del></del>
New Registered Office Address:	Enter Florida street	address	
		Florida	
· ·	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my dut ovided for in Chapter	ies, and I am familiar wi 605, F.S. Or, if this doc	th and ument is
If Chang	ing Registered Agent, Sign	ature of New Registered Ager	<u></u>

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

Title 4MBR	Name SHARON G. McCULLAR	Address 21 MAR 26 PA 2: 27 5312 WHITEWAY DRIVE 25 TEMPLE TERRACE, FU 33617	Type of Action
•			•
MGR	BRYAN K. McCULLARS	5-312 WHITENAY DRIVE SQ TEMPLE TERRACE, FLA. 3361	□Change
		TEMPLE TO WORKE, TOWN	
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an effective <b>(ote:</b> If th	e date is listed ne date inser	i, the date mu	st be specific lock does n	and cannot of meet th	e applicab			90 days after	filing.) Pursi	uant to 605,0207 not be listed as
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Filing Fee: \$25.00