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COVER LETTER

Division of Corp	orations	.	
	TERNATIONAL LLC	·	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	ERICK JULES		
	***	Name of Person	
	METELEC INTERNATIO	NAL LLC	
		Firm/Company	
	1320-1330 NW 119TH ST	TREET	
		Address	
	MIAMI, FLORIDA 33167		
		City/State and Zip Code	
	ZIPX357@GMAIL.COM		
		to be used for future annual report noti	rication)
For further information con	ncerning this matter, please co	all:	
ERICK, JULES		786 7384557	
Name of	Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
M. Wan Address		Street Address	

Mailing Address:

TO:

Registration Section

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

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 OF

(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp.	any were filed on 04/01/2021	and assigned
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 L	iability Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:	1320-1330 NW 119TH STREET	
Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FLORIDA 33167	
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, enter the nam	ne of the new regis
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Florida	<u> </u>
	City	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.

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	MIREILLE ST- AMOUR METELI	1341 NW 115TH STREET 1341 NW 115TH STRE	ET ≣ Add
		MIAMI, FLORIDA 33167	□Remove
		SECRETARY	□Change
SECRET ERICK JULES	ERICK JULES	1341 NW 115TH STREET	□Add
	MIAMI, FLORIDA 33167	Remove	
		□Change	
		□Add	
		□Remove	
		□Change	
		□Add	
		□Remove	
		□Change	
		□Add	
		□Remove	
		□ Change	
		□Add	
		□Remove	
			□Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	the date, if other than the date of filing:
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 ed.
Dated (05/20/2021
	Signature of a member or authorized representative of a member
	ERICK JULES
	Typed or printed name of signee

.

Filing Fee: \$25.00