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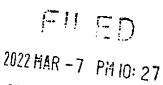
TO:

**Registration Section** 

Division of Corporations					
Metal Allia	uice Holdings, LLC		•		
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Alexzander Gonano				
		Name of Person			
	Gonano & Harrell				
		Firm/Company			
	1600 South Federal Highw	vay, Suite 200			
		Address	· <del></del>		
	Ft. Pierce, FL 34950				
		City/State and Zip Code			
	agonano@gh-law.com	to be used for future annual report not	rification)		
For further information c	oncerning this matter, please c	·			
Alexzander Gonano		772 464-1032			
	d Person	at (	ne Telephone Number		
Name o	T F CISON	Area code 17ayın	ne receptione (vanile)		
Enclosed is a check for the	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 Addres Registration S		Street Address: Registration Se	ection		
Division of Corporations		Division of Corporations			
P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	Laffahassee oe Street, Suite 810		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## DocuSign Envelope ID: 341D52B2-2FDD-4CD7-8F81-8AC78A6976E5 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



Metal Alliance Holdings, LLC

SECRETALY OF SIX

( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabilit	t now appears on our records.) y Company)	MELAHASSEE, F. C. C.
The Articles of Organization for this Limited Liability Company were Florida document number <u>L21000173289</u>	filed on April 14, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Co	mpany." the designation "LLC" or t	he 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 agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ss on our records, <u>enter the</u> Enter Florida street address	
	, Florida	a Zip Code
	îiy.	Zip Code
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfeacept the obligations of my position as registered agent as provide being filed to merely reflect a change in the registered office addressmany has been notified in writing of this change.	rmance of my duties, and I led for in Chapter 605, F.S.	am familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 241D52B2:2FDD-4CD7-8F81-8AC78A6976E5 in amending Authorized rerson(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>	<u>Address</u>	Type of Action
AMBR	Darius Moura	2120 SW Poma Drive	DAdd
		Palm City, FL 34990	□Remove
			■Change
AMBR	Max Levin	2120 SW Poma Drive	□Add
		Palm City, FL 34990	□Remove
		,	■Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
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			□ Change

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ET CC	
If an effe Note: 1	ctive 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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
ne record ord is file	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 d.
Dated _	3/3/2022 Docubigned by.
	Pal 14
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00