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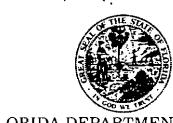
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FLORIDA CAPITAL COURIER SERVICES, INC . . . 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

(OFFICE USE ONLY) Corporation Name & Document Number, (if known): AZEMETAL LLC L21000201071 Document # (Business Name) Pick up time____ Walk in Will wait Mail out Photocopy Certified Copy (please stamp each page) **Certificate of Status AMMENDMENTS NEW FILINGS** Profit x Amendment Resignation of R.A. Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other **CORP** Conversion **REGISTERATION/QUALIFICATIONS OTHER FILINGS** Foreign filing Annual Report _Limited Partnership Reinstatement Fictitious Name Other ____ APOSTIL () __ Country

EXAMINER'S INITIALS:



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2021

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: AZEMETAL LLC Ref. Number: L21000201071

We have received your document for AZEMETAL LLC and your check(s) totaling \$200.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document is too light for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 921A00015341

Yasemin Y Sulker Regulatory Specialist III

-2021 JUL -7 PH 3: 3

www.sunbiz.org

COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
CHIPIES	AZEMETA			
SUBJECT: Name of Lim			ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		MARTIN E. DELLOCA		
			Name of Person	
		MDELL CONSULTING O	CORP	
		-	Firm/Company	
		777 BRICKELL AVE STI	E 500-49	
			Address	
		MIAMI, FL, 33131		
			City/State and Zip Code	
		MDELLOCA@MDELLCO		
		E-mail address: (to be used for future annual report notif	lication)
For furth	er information o	concerning this matter, please c	all:	
MARTIN	N E. DELLOCA		305 607-3493 at ()	
	Name o	of Person		e Telephone Number
Enclosed	is a check for t	he following amount:		
≡ \$ 25.0	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 Address Registration	Section	Street Address: Registration Sec	
	Division of C	=	Division of Cor	•
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AZEMETAL LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records. Limited Liability Company)	.)
The Articles of Organization for this Limited Liability C Florida document number 1.21000201071	ompany were filed on 05/07/2021	and assigned
This amendment is submitted to amend the following:	<i>_</i> ∙	
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	. <u></u>	
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	i office address on our records, <u>enter t</u>	he 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	
		• • •
	City F10	rida 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 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	Dario Francisco Samaniego	777 BRICKELL AVE	≣ Add
		STE 500-49	□ Remove
		MIAMI, FL., 33131	□Change
			□Add
			Remove
			Change
			\ _Add
			Remove
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			Remove
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Effective date, if other than the date of filing: [If an effective 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 Mote; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. c 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 rd is filed Dated MARTIN E. DELLOCA MARTIN E. DELLOCA	Effective date, if other than the date of filing:				
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