

LZ1 000 277738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

J.C.
07/16/21



400368251034

06/21/21--01020--010 **25.00

2021 JUN 21 AM 11:24

CLERK

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HEXMETAL LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDRES HURTADO
Name of Person

PRODEZK INC
Firm/Company

848 BRICKELL AVE STE 950
Address

MIAMI, FL 33131
City/State and Zip Code

INFO@PRODEZK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDRES HURTADO at () 3052048422
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:
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**

HEXMETAL 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 were filed on 06/15/2021 and assigned Florida document number L21000277738.

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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

255 NE 87TH ST

EL PORTAL, FL 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

255 NE 87TH ST

EL PORTAL, FL 33138

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

255 NE 87TH ST

Enter Florida street address

EL PORTAL

City

, Florida 33138

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>	<u>Address</u>	<u>Type of Action</u>
MGR	FRANCISCO J FERRAND GALV	225 NE 87TH ST	<input type="checkbox"/> Add
		EL PORTAL, FL 33138	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SIMON JARAMILLO URREA	225 NE 87TH ST	<input type="checkbox"/> Add
		EL PORTAL, FL 33138	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FRANCISCO J FERRAND GALVES	255 NE 87TH ST	<input checked="" type="checkbox"/> Add
		EL PORTAL, FL 33138	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SIMON JARAMILLO URREA	255 NE 87TH ST	<input checked="" type="checkbox"/> Add
		EL PORTAL, FL 33138	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

We want to change the purpose; INTERNATIONAL TRADE OF GOODS AND OTHER PROFESSIONAL SERVICES AS WELL AS ANY ALL LAWFUL BUSINESS.

E. Effective date, if other than the date of filing: _____ **(optional)**

(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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated JUNE 17TH, 2021

Simón Jaramillo U.

Signature of a member or authorized representative of a member

SIMON JARAMILLO URREA

Typed or printed name of signee