

L2200094509

Florida Department of State
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Fax Number : (850)617-6383

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BUSSINES GLOBAL METAL BGM LLC

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DIVISION OF CORPORATIONS
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T. LEMIEUX

OCT 23 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BUSSINES GLOBAL METAL BGM 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:

ALEJANDRO MATAMORO

Name of Person

BUSSINES GLOBAL METAL BGM LLC

Firm/Company

8150 LIRIOPE LOOP

Address

LEHIGH ACRES FL 33972

City/State and Zip Code

GAIL.LAXMYSCARRIER@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAXMY CHACON

305

640-0281

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

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☐ \$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
315 N. Monroe St.
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUSSINES GLOBAL METAL BGM 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 03/07/2022 and assign
Florida document number L22000094509.

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)

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

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of A</u>
MGR	GOMEZ REYES, YUNEISI	8150 LIRIOPE LOOP	<input type="checkbox"/> Add
		LEHIGH ACRES FL 33972	<input checked="" type="checkbox"/> Remo
			<input type="checkbox"/> Chang
MGR	GOMEZ LEDESMA, DELFIN	903 WILLOW DR	<input checked="" type="checkbox"/> Add
		LEHIGH ACRES FL 33936	<input type="checkbox"/> Remo
			<input type="checkbox"/> Chang
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remo
			<input type="checkbox"/> Chang
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