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22 MAY -9 AM 9: 50

T. MATTHEWS

JUL - 1 2022

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: NEISC	on's Metals, L		
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Richard N	Name of Limited Liability Company at and fee(s) are submitted for filing. Seeming this matter to the following: Sichard Nelson Name of Person Pelson's Metals, LUC Firm/Company Sos NW 13th Street Address Address Address Address City/State and Zip Code ene enelsonsbuildings. com E-mail address: (to be used for future annual report notification) nis matter, please call: Son at (352) Area Code Daytime Telephone Number amount: Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee.	
	Nelson's N		
	4505 NW		
	Gainesville	FL 32609	
			n
	E-mail address: (to be used for future annual report not	ification)
For further information co	ncerning this matter, please ca	all:	
Richar	d Nelson	352 \ 374-	1705
Name of	 		
Enclosed is a check for the	e following amount:		
 ■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Address Registration S Division of Co P.O. Box 632	ection orporations	Street Address: Registration Se Division of Co The Centre of	rporations
Tallahassee, F	L 32314	2415 N. Monro Tallahassee, Fl	pe Street, Suite 810 L 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

I SECRETARY OF STATE DIVISION OF CORPORATIONS

22 MAY -9 AM 9: 50

Nelson's Metals, 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 MC	arch 10, 2022 and	assigned
Florida document number <u>L22000122708</u>			
This amendment is submitted to amend the following:	mendment is submitted to amend the following: amending name, enter the new name of the limited liability company here: v name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C." new principal offices address, if applicable: itipal office address MUST BE A STREET ADDRESS) new mailing address, if applicable: ing address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new register and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		
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 "LLC." 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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the desig	gnation "LLC" or the abbreviation	ı "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)			
	A POST OFFICE BOX)		
	iddress on our reco	ords, <u>enter the name of the</u>	new register
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	ı street address	
		, Florida	
	City	Zip C	ode
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree	ee to act in this cap	pacity. I further agree to c	omply with ti

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 adde or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AP	xene Nelson	4505 NW 13th street	□Add
		Gainesville, FL 32609	X Remove
			□Change
			□Add
			□ Remove
			□Change
			🗆 Add
			□Remove
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If an effe Note:	ective date is listed If the date inser	ner than the date d, the date must be sprted in this block d date on the Departi	pecific and cannot oes not meet the	e applicable statu	filing or more than tory filing requi	(optional 90 days after filin rements, this dat) g.) Pursuant to 605.09 e will not be listed	207 (3 I as th
e record and is file		ayed effective date	:, but not an effe	ective time, at 12	:01 a.m. on the e	earlier of: (b) T	he 90th day after t	:he
	May	4	<u>a</u> (033				
Dated ₋								
Dated _		Sione	Hum of a member	or authorized repr	esentative of a me	mber		