L22000163114

(Requestor's Name)
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(Document Number)
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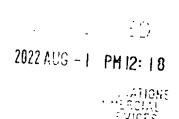
COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: METIER SUITE 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:
CUFTON RED Name of Person
METIER SUITE LLC Firm/Company
2713 PIENZA CIRCLE
CALEIDIM C GMAIL. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CUFTON LET D at (561) 315 7234 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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





July 18, 2022

CLIFTON REID 2713 PIENZA CIRCLE ROYAL PALM BEACH, FL 33411

SUBJECT: METIERSUITE.OI LLC Ref. Number: L22000163114

We have received your document for METIERSUITE.OI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 822A00015932

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 AUG - 1 AM 8: 44

METTER SITTE . IO I	10	SEURETARY OF STATE
METTER SITTE · TO (Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Liability Company)	TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Company Florida document number	were filed on APAL 5, 6	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
METIER SUITE L	LC	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 a	iddress on our records, enter the	aname of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	da Zıp Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I furth	er agree to comply with the
provisions of all statutes relative to the proper and complete	performance of my duties, and	l 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:

or removed from our records:		
,		
MGR = Manager		
AMBR = Authorized Member		

<u>Title</u>	Name	Address	Type of Action
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Effective dat Fan effective da		this block doc	es not meet th	e applicable s	statutory filing	requirements, th	his date will not b	e listed	as t
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Filing Fee: \$25.00