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2022 JUL 22 PH 4: 30

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HETALMEX 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:
MONIKA RESHEE Name of Person
METAL MEX LLC Firm/Company
1407 PINETREE CIR.
Circ State and Zip Code MRESHEF WOUTLOOK & CUM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MONIKA RESHET at (813) 585 7116 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: Solution Soluti

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

FILED

METALMEX 110	2022 JUL 22 PM 4: 30
(Name of the Limited Liability Compan	y as it now appears on our records.).
The Articles of Organization for this Limited Liability Company version of the Liability Company version of the Limited Liability Company version of the Liability Company version of t	116 (416 120)
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	y 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 ac agent and/or the new registered office address here:	idress on our records, enter the name of the new registered
agent and/of the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree	e 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 Type of Action <u>Address</u> **Title** <u>Name</u> AMBR MISAEL GOMEZ 1407 PINETREE CIR. MANDE MARTINEZ WIMAUMA, FL 33598 | Remove _____ Change _____ □Add _____ Change _____ □Remove _____ □ Change ______ □Rumove ______ □Change ____ □Remove _____ Change

______ □Add

□Remove

of filing or more than 90 days after filing.) Pursuant to 605.0207 (uttory filing requirements, this date will not be listed as t
12:01 a.m. on the earlier of: (b) The 90th day after the
epresentative of a member

Filing Fee: \$25.00