## 122000267097

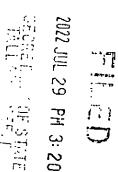
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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A. BUTLER OCT 2 4 2022

## **COVER LETTER**

TO: Registration S Division of Co			•
	omes Air LLC	•	
SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Alejandro Marriaga		
		Name of Person	<del></del> _
	Steel X Homes Air LI	LC	
		Firm/Company	
	1475 Pine Ave		
		Address	
	Orlando FL 32824		
		City/State and Zip Code	
	info@steelxhomes.com		
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report no all:	otification)
Paavo Salm	ni	. 407	866-5415
Name	of Person		ime 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)	560.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Address:	
Registration Section		Registration S	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee,		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

( <u>Name of the Limited Liability</u> (A Florida )	y Company as it now appears on our record Limited Liability Company)	<u>s,</u> )
The Articles of Organization for this Limited Linkille, Co		. 1 ' 1
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
Florida document number L22000267097	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limite	ted 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 ADDRE	ESS)	
Enter new mailing address, if applicable:	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)		
<ol><li>If amending the registered agent and/or registered egent and/or the new registered office address here:</li></ol>	office address on our records, <u>enter (</u>	the name of the new regis
Name of New Registered Agent:		
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address	
		rida

## N

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>	Address	Type of Action
MGR	Paavo Salmi	1475 Pine Ave, Orlando FL 32824	<b>\exists</b> Add
			Remove
			□Change
			□Add
			□Remove
			□Change
	<del></del>	<del></del>	□Add
			□Remove
			Change
		□Add	
			□ Remove
		<del></del>	□Change
		□Add	
		□Remove	
			□Change
		□ Add	
		-	□Romove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
,	
-	
-	
(If an efi <u>Note:</u>	ive date, if other than the date of filing:
the recor	d 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 led.
Dated	7/25/2022
	Signature of a member or authorized representative of a member
	Marria
	Typed or printed name of signee

Filing Fee: \$25.00