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IUZZ OCT 12 PM 1: 25 SECRETARY OF STATE TALLAHASSEE, FI

COVER LETTER

Division of Cor				
SUBJECT: EA	HGLE METAL L	·		
30bJEC1	Name of Lin	mited Liability Company		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return all correspondent	ondence concerning this matte	r to the following:		
	Roasos	L. BROWN JR	•	
		Name of Person		
	_ EAGLE	METAL LLC Firm/Company		
		Firm/Company		
	2250	IN TAH AUG		
		N. JAY AVE		. ~
				022 SEC
	PORT ST.1	VCIE FL. 3495 City/State and Zip Code 1222 @ YAHOO. C	-3	2022 OCT 12 PM 1: 26 SECRETARY OF STATE TALLAHASSEE, FL
		City/State and Zip Code		20 -
	DRACCO	1222 @ YAHOO. C	.0NI	2 - 2 - 1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 -
	E-mail address:	(to be used for future annual report not	fication)	SE PH
	concerning this matter, please			FST -
		at (<u><u>012</u>) <u>801-8</u> Area Code Daytim</u>		TE 26
KUBERT L.	BROWN IR.	ai (<u>112)</u> <u>801-8</u>	915	
Name o	of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he following amount:			
S25.00 Filing Fee	\$30.00 Filing Fee &	S55.00 Filing Fee &	□ \$60.00 Fil	ing Fee
	Certificate of Status	Certified Copy	Certificate	e of Status &
		(additional copy is enclosed)	Certified (Copy copy is enclosed)
				.,
Mailing Addre	ss:	Street Address:		
Registration		Registration Se	ction	
Division of C	Corporations	Division of Cor	•	
P.O. Box 632		The Centre of T		
Tallahassee.	FL 32314	2415 N. Monro	e Street, Suite 81	({ }

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	FAGLE Meti							
	(Name of the Limited Lia (A Flo	<u>ibility Compa</u> orida Limited I	ny as it now appe Jiability Company)	ars on our rec)	cords.)			
The Articles of Organization f	or this Limited Liability	y Company	were filed on _	8/4,	12022	and a	ssignec	ł
Florida document number 🗘	72000 34418	6_						
This amendment is submitted	o amend the following	<u>7</u> .						
A. If amending name, enter	the new name of the l	limited liabi	lity company l	<u>nere</u> :				
The new name must be distinguishal	ple and contain the words "I	Limited Liabil	ity Company," the	designation "l	LLC" or the abb	reviation "	L.1C."	
Enter new principal offices a	ddress, if applicable:							
(Principal office address MU		DRESS)						
-						4.3		
				_		TA DEC	022	
Enter new mailing address, i	f applicable:						00	3 1
(Mailing address MAY BE A	POST OFFICE BOX)	<u>)</u>				* E A	<u>~</u> .	-
						SSO	_0_	-
						S		Final
B. If amending the registere agent and/or the new registe			ddress on our	records, <u>en</u>	ter the name	of the n	ekî reg	<u>istered</u>
agent and or the new registe	ed office address her	<u>.</u> .				• • •	Ο.	
Name of New Regist	ered Agent:	<u>.</u>						
New Registered Offi	ce Address:							
			Enter Flo	orida street ad	dress			
				,	Florida			
		_	City			Zip Code		
New Registered Agent's Signat								
I hereby accept the appointnorovisions of all statutes rela accept the obligations of my being filed to merely reflect to company has been notified in	tive to the proper and position as registered a change in the regist	d complete d agent as p tered office	performance o provided for in	f my duties Chapter 60	, and I am fa 05, F.S. Or. ij	miliar w this doo	rith and cument	1
		If Chan	ging Registered A	gent, Signatu	re of New Regis	stered Age	ent	

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 = Ms $AMBR = As$	anager uthorized Meml	ber		
<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	ERIL	L. BROWN	2250 SW JAY AVE	🗀 Add
			PORT ST. LUCRE, FL 34953	Remove
				□ Change
	-			🗆 Add
				□Remove
				□Change
				□Add
				□Remove
				□Change
			TALLA	DECEMBER 12
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				□Add
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D. If am	ending any other in	formation, enter change(s) here: (Attach additional sheets, if necessary.)	
		SECRE TALL	<i>ब्या</i> म्
		ARY AHA	
		OF STALL 2	Ö
(If an ef	fective date is listed, the d	an the date of filing: (optional) the must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605	
		this block does not meet the applicable statutory filing requirements, this date will not be listen the Department of State's records.	ed as the
If the record is fi		ffective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
Dated	9/27/2	Signature of a member or authorized representative of a member	
		ROBERT L. BROWN TR. Typed or printed name of signee	

Filing Fee: \$25.00