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(Requ	estor's Name)	-
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COVER LETTER

TO: Registration Section Division of Corporations

JG Metals LLC

SUBJECT:			
	Name of Lim	ited Liability Company	202
	Amendment and fee(s) are sub ndence concerning this matter Terri Peters		2023 NOV 27 PM 1: 04 HELATPERT OF STATE HALLAHASSEELFLORIDA TALLAHASSEELFLORIDA
		Name of Person	
	Tax Time Ledgers LLC		
		Firm/Company	
	9151 Delano St Unit 9702		
		Address	
	Naples FL 34113		
	terri@taxtimeledgers.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	tification)
For further information co	oncerning this matter, please ca	all:	
Terri Peters		970 764-8825	
Name of	CD	at () Area Code — Daytin	ne Telephone Number
Name O	i retson	Area v. ode – Dayun	ne reiepaone sumber
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	© \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee. Certificate of Status & 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF** JG 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 10-20-22 and assigned Florida document number 1.22000452245 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TAP Tay LLC 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

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> AMBR	<u>Name</u> Randall Peters	Address 9151 Delano St Unit 9702	Type of Action
			□ Add
		Naples F1, 34113	■Remove
AMBR	Terri Peters	9151 Delano St Unit 9702	□ Change
			■Add
		Naples FL 34113	□Remove
			□ Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot ote: If the date inserted in this block does not meet the ocument's effective date on the Department of State's respective.	applicable statutory filing requirements, this date will n	uant to 605,6207 (not be listed as t
record specifies a delayed effective date, but not an effe l is filed.	tive time, at 12:01 a.m. on the earlier of: (b) The 90th	h day after the
11/17 2023		
rated	r authorized representative of a member	