123000182193

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COVER LETTER

Registration Section

TO:

Division of Cor	porations		
SUBJECT: <u>CMR ME</u>	TALS ILC		
Sebate 1. OWN ME	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Corpor	ate Maintenance L	.ead
	-	Name of Person	
	Proc	essing Departmer	nt 🛪
		Firm Company	(بر
	1	1450 Vassar St	;; ;;
		Address	رند
		Reno, NV 89502	•
		City State and Zip Code	
	E-mail address: (to be used for future annual report r	otification)
For further information co	oncerning this matter, please co	all:	
Process	ing Department	at (800) 638-232	20
Name of		Area Code Day	time Telephone Number
Enclosed is a check for th	e following amount:		
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed:	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Registr Divisio P.O. Be	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive	porations 2

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CMR 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 Compan	y were filed on 04/12/23	and assigned
Florida document number L23000182193		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here;	
		3
The new name must be distinguishable and contain the words "Limited Linf	oility Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3500 W King St	
(Principal office address MUST BE A STREET ADDRESS)	Cocoa, FL 32926	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	845 Pennsylvania Ave	
(Mailing address MAY BE A POST OFFICE BOX)	Rockledge, FL 32955	
Name of New Registered Agent:		
New Registered Office Address:	Emer Florida street address	
	Llori	:.i.,
	City . City	idaZip Code
New Registered Agent's Signature, if changing Registered Agent	<u>::</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is
If Ch	anging Registered Agent, <u>Signature of </u>	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	Bret Beynon	845 Pennsylvania Ave	
		Rockledge, FL 32955	Remove
			Change
			Add
			Remove Change
			Change
			Add .
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

		
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reffective date is listed, the date must	ck does not meet the applicable statutory	(optional) g or more than 90 days after filing.) Pursuant to 605.0 r filing requirements, this date will not be listed
record specifies a delayed he 90th day after the reco		ive time, at 12:01 a.m. on the earlier
ed05/15		
	Signature of a member or authorized represen	
	Signature of a member or authorized represen	trative of a member

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Filing Fee: \$25.00