

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000223529 3)))



H230002235293ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : USACORP INC. Account Number : 120130000019 Phone : (718)362-4789 Fax Number : (718)408-2550

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

thephotometal@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PHOTO METAL LLC

RETURN 22 PM 3: 32
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALL ANASSEE FLORIDA

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

T. LEMIEUX

JUN 2 3 2023

Electronic Filing Menu

Corporate Filing Menu

Help

06/22/2023 16:46 From: 17184082550 To: 18506176383 Date Time 06/22/23 04:46PM Pages: 4 P: 2/4

(((H23000223529 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our reco	urds.)
The Articles of Organization for this Limited Liability Company Florida document number		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	601 NE 36th St, Apt 2110	
(Principal office address MUST BE A STREET ADDRESS)	Mianti, FL 33137	
Enter new mailing address, if applicable:	601 NE 36th St, Apt 2110	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33137	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		rds. enter the name of the ne
Name of New Registered Agent:		
		ို့ ထ
New Registered Office Address:	Enter Florida street ada	bress
New Registered Office Address:		Florida

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

06/22/2023 16:46 From:17184082550 To:18506176383 Date Time 06/22/23 04:46PM Pages: 4 P: 3/4 ((H230002235293)))

(((H23000223529 3)))
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

Title	<u>Name</u>	Address	Type of Action
AMBR	Chaim Stengel	601 NE 36th St. Apt 2110	= Add
		Miami, FL 33137	☐ Remove
			Change
MGR	Chaim Stengel	601 NE 36th St, Apt 2110	□ Add
		Miami, FL 33137	Remove
			□ Add
			□ Remove
			□ Change
			Remove
			□ Change
			Add
			□ Remove
			□ Change
			Add
			□ Remove
			☐ Change

06/22/202:	3 16:46	From: 17184082550 1	0:18506176383 Date	Time 06/22/23 04:46PM Pages: 4	P: 4/4
(((H230	00223529 3))) or information, onter c	hanga(e) haras (Augob	additional sheets, if necessary.)	
D. II ame	ionig any och	er mormadon, enter c	nange(s) nere: (Attach t	additional sheets, if necessary.)	
_	<u> </u>	.			
_					
_					
_	···· ·································				-
					-
_					-
_					
					-
_					-
					_
					-
_					•
_	 .				-
_	_				_
					-
C CCC		and a should a of filling		(antiquel)	
L. Effective (If an effe	ve date, ii otn ctive date is listed	er than the date of him i, the date must be specific an	g:d cannot be prior to date of filis	optional) ng or more than 90 days after filing.) Pursuant to 60.	5.0207 (3)(b)
Note:	If the date inser	ted in this block does not i ate on the Department of S	neet the applicable statutor	y filing requirements, this date will not be list	ed as the
If the rec	ord specifies	a delayed effective	date, but not an effec	tive time, at 12:01 a.m. on the earli	er of:
(b) The	90th day aft	er the record is filed.			
	June 22		2023		
Dated _					
	/s/ Chai i	m Stengel			
		Signature of a	member or authorized represe	entative of a member	
	Chaim Ster	ngel			
			Typed or printed name of si	mee	

Page 3 of 3

Filing Fee: \$25.00