

L/2000/4/1963

Florida Department of State
Division of Corporations
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850)617-6333

From: Account Name : BUCHANAN INGERSOLL & ROONEY PC - TAMPA OFFICE
Account Number : I1999000148
Phone : (813)769-7692
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
V MARINE FUELS US LLC

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2nd Faxing

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K. SALY
JUL 23 2019

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: V MARINE FUELS US LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Richard A. Jacobson, Esq.
Name of Person
Buchanan, Ingersoll & Rooney PC
Firm/Company
401 E. Jackson St., Suite 2400
Address
Tampa, FL 33602
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard A. Jacobson at (813) 222-1105
Name of Person Area Code Daytime 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)
- \$60.00 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Buchanan Ingersoll + Rooney 4125621041

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

FILED
19 JUL 22 PM 11:40
TALLAHASSEE, FLORIDA

V MARINE FUELS US 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 November 8, 2012 and assigned Florida document number LI2000141963

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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

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

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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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------------------------|-----------------------------|--|
| CoMgr | Guimaraes Nicola, Fernando Luiz | 500 Australian Avenue South | <input type="checkbox"/> Add |
| | | Suite 705 | <input checked="" type="checkbox"/> Remove |
| | | West Palm Beach, FL 33401 | <input type="checkbox"/> Change |
| CoMgr | Ireland, Thomas Anthony | 500 Australian Avenue South | <input type="checkbox"/> Add |
| | | Suite 705 | <input checked="" type="checkbox"/> Remove |
| | | West Palm Beach, FL 33401 | <input type="checkbox"/> Change |
| Mgr | Ireland, Thomas Anthony | 500 Australian Avenue South | <input checked="" type="checkbox"/> Add |
| | | Suite 705 | <input type="checkbox"/> Remove |
| | | West Palm Beach, FL 33401 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Multiple horizontal lines for amending information.

19 JUL 22 PM 11:46
FILING OFFICE
HALL STREET, BALTIMORE, MD

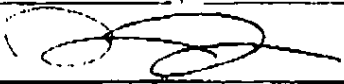
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 7/17/2019



Signature of a member or authorized representative of a member

Authorized Agent

Typed or printed name of signee