101000021377

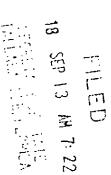
(Requestor's Name)
•
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Cartified Coning
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800318231338

09/13/18--01020--027 **\$0.00



COVER LETTER

TO: Registration S Division of Co			
3262 ENE SUBJECT:	RGY LLC		
	Name of Lim	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LEONARDO CARDONA		
		Name of Person	
	3262 ENERGY LLC		
	6345 NW 32 AVE	Firm/Company	
		Address	
	MIAMI , FLORIDA. 3314	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
LEONARDO CARDON	NA.	954 562 6945	
Name (of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3262 ENERGY LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lia	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on DEC 11, 2001	and assigned
Florida document number L01000021377		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
		÷;
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:	6345 NW 32ND AVE , MIAMI FL .	33147
Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
3. If amending the registered agent and/or register	ed office address on our records, ent	er the name of the
egistered agent and/or the new registered office addres	<u>s here</u> :	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	rmer riorida sireei address	
	, Florida	Zin Code
	City	Zin 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

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>	Type of Action
AMBR	ANTONIO RODRIGUEZ	6345 nw 32 ave . Miami Fl 33147	5
			□ Remove
		-	☐ Change
	 		
			□ Remove
			Change
			Add
			Remove
			□ Ghango
			7
			Remove
			Change
			
			Remove
			Change
			Add
			□ Remove
			□ Change

`							
					<u>-</u>		
							<u>_</u>
	<u> </u>						
						<u>-</u>	
							<u>co</u>
							8 7
-							7
			····				\ · 堊
						<u></u> :	5 S
				·			
				· · · · · · · · · · · · · · · · · · ·			
							
			10/01/2010				
n effective date is I	other than the isted, the date must	be specific and of	cannot be prior to	o date of filing or i	nore than 90 days	ptional) after filing.) Pursi	uant to 605.02
ote: If the date in cument's effective	serted in this blove date on the Do	ock does not me partment of St	eet the applical ate's records.	ole statutory fili	ng requirements,	this date will n	ot be listed
	ies a delayed after the reco		ate, but not	an effective	time, at 12:0)1 a.m. on th	ne earlier
ted <u>09-10</u>	-18						
		7/	-	<i>ਤ</i> ੰ			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00