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SECRETARY OF SIMIL DIVISION OF CORPORATION

APR -4 2012' T. HAMPTON

TO: Registration Section Division of Corporations: SUBJECT: SOUTHEAST RENEWABLE FUELS 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: A RON PEPPER Name of Person SOUTHEAST RENEWABLE FUELS Firm/Company GUZY NW STH WAY Address FT. LANDERDAR FL 33309 City/State and Zip Lode

For further information concerning this matter, please call:

AARON	PEPPER	at (954)	492	1588	
Name of Person		Area	Code & Daytime T	elephone Number	

Enclosed is a check for the following amount:

	ū		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	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**

SOUTH EAST (Name of the Limited I	RENEWAR	BLE FUELS	ilc	
(Name of the Limited I (A I	Florida Limited Lia	bility Company)	our records.)	
(A I The Articles of Organization for this Limited Lia Florida document number <u>L0700089</u>	bility Company w	vere filed on	131/07	DIVERSION OF CARPOR -3
This amendment is submitted to amend the follow				고 필유다
A. If amending name, enter the new name of t	the limited liabili	ity company here:		STATE I: 35
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Company," 1	the designation "LI	C" or the abbreviation
Enter new principal offices address, if applicat	ble:	6424 NU FT. LAUDER	USTH U	UAY
(Principal office address MUST BE A STREET	(ADDRESS)	tt. LAUder	dace, the	, 33309
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	6424 NW Ft. Lauder	STH W.	/AY , 33309
B. If amending the registered agent and/or registered agent and/or the new registered offi	ce address here:	AARON PEPI	PER	
Name of New Registered Agent:		AST RENEWA		
New Registered Office Address:	6424 NL	J 5TH WAY-	louide atuant edd.	200
	FT. LAUJ.	J5TH WAY- Enter Fl OR CACL- City	oriaa sireel aaare , Florida <u>F</u>	33309
		City		Zip Code
New Registered Agent's Signature, if changing Re	gistered 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 608, 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

Page 1/of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>mgrm</u>	AARON PEPPER	5424 LEHTNER DR. EAST CORAL SPRINGS, FL 33067	P_Add Remove
MGR	MORTY BENOWITZ	5761 DUCKWEED Rd.	Add Remove
Mar	DON MARKLEY	1570 WEFFING WILLOW WAY HOLLY WOOD FL 33019	Add Remove
MGR	CARLOS RIONDA	10310 SW 19TH MIAMI, PL, 33165	Add Remove
MGR	UNI SYSTEM do BRASIL	RUA: ANTONIO SERON, 342-CENTI 14160-520 SERTAOZINHO - SP- BRASIL	& □ Add □ □ Remove
			Add Remove
D. If am	ending any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	PARTNERSHIP
-	AARON PEPPER	35%	OWNERSHIP IN PERCENTIFIE
-	MORTY BENOWITZ	30×	_
_	CARLOS RIONDA	10%	_
	DON MARKIEY	10%	SE DIVIS
•	DON MARKLEY UNI-SYSTEMS DO BRASIL	- 15%	APR
Dated	4/2/12	Han Pa	FILED ARY OF SIATE F CORPORATION F 3 PM 1: 35
	Signature of a member	or authorized representative of a member AARON PEPPER	01 ×
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00