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**EXAMINER** 



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SECRETARY OF CLAY HERE

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: EP	G FUELS LLC (Name of Limi		
SUBJECT:	(Name of Limi	ted Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	NICOLAS LUNI	D-LARSEN	
		(Name of Person)	
	EPG FC	ELS LL C (Firm/Company)	
		(Firm/Company)	
	6865 BAY DR. 1	<i>'</i> 1	
		(Address)	
	MIAMI BEACH,	FL 33/41	
		(City/State and Zip Code)	
For further information co	oncerning this matter, please ca	ıll:	
WCOLAS LUVE	D-CAESEN	at (305 ) 467 - 10 47 (Area Code & Daytime T	2
(Name o	i Person)	(Area Code & Daytime I	elepnone 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 (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



	ELS, LLC
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our records.  la Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number 40900071597	Company were filed on <u>03/64/2009</u> and assigned
This amendment is submitted to amend the following:	:
A. If amending name, enter the new name of the li	imited liability company here:
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg	gistered office address on our records, <u>enter the name of the new</u> ddress here:
Name of New Registered Agent:	
New Registered Office Address:	(Enter Florida street address)
	, Florida
	(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 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)

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

MGR = Manager

MGRM = Managing Member Title <u>Name</u> **Address Type of Action** MGR ROGERABERNSTEIN ☐ Add Remove MGR CCSCUSA, LLC 6865 BAY DENCE 11 ☐ Add Remove MGR ALGKE TO ETHANOL, UC MGR CCSC EPG, LLC Add 🔀 Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 0407 2009 Signature of a member or authorized representative of a member

Page 2 of 2

Virolas Lund-Larsen

Filing Fee: \$25.00

Typed or printed name of signee