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COVER LETTER

TO:	Registration Sect Division of Corpo	ion ' orations		
SUBJE	CT:	D&D Fue	el Services, LLC	
			ted Liability Company	
The end	closed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please 1	return all correspond	lence concerning this matter	to the following:	
			Don Weidenfeld Name of Person	
		D8	kD Fuel Services, LLC	
		Firm/Company		
6011			O11 Via Venetia North Address	
			33484 City/State and Zip Code	
		E-mail address: (1	idenfeld@bellsouth.net to be used for future annual report in	otification)
For furt	ther information con	cerning this matter, please c	all:	
	Don Name of P	Weidenfeld Person	at (<u>561</u>) Area Code & Day	702-9000 time Telephone Number
Enclose	ed 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 enclo	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
2(Registrati Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, FL 32314	STREET/COU Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee FL	porations 3 Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

O9 OCT 14 AM 9: 47

D&D	Fuel Services, LLC	SEC. 14 AM 9: 47
(Name of the Limited Liab (A Flori	Fuel Services, LLC ility Company as it now appears of ida Limited Liability Company)	ON OUR TELEVISION OF STATE STATE FLORIDA
The Articles of Organization for this Limited Liabilit		
Florida document numberL0900053447	•	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	"," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	_	records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter	Florida street address
	2,116.	
	City	, Florida 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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGMR	Dino Farruggio	9708 Vineyard Court Boca Raton, FL 33428	Add Remove
			Add Remove
			AddRemove
D. If ame	nding any other information, ente	r change(s) here: (Attach additional sheets, if necess	sary.)
-			09 OCT
- -			
Dated	September 24 Signature of a	Id Managua Membes	9: 4.7 STATE
	DONALDWEIDEN		

Page 2 of 2

Filing Fee: \$25.00