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SECKETARY OF STATE
TALLAHASSEE, FLORINA

B. KOHR

SEP - 2 2009

EXAMINER



CT 1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

August 25, 2009

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301



Re: Order #: 7638946 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Sunoco of St Augustine II LLC (FL) Amendment (Change of Name) Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

r,

	Registration S Division of Co				
SUBJEC	T:	SUNOCO OF S	ST AUGUSTINE II LLC		
	-		ited Liability Company		
The enclo	sed Articles of	Amendment and fee(s) are sul	bmitted for filing.	AUX P	
Please ret	urn all correspo	ondence concerning this matter	to the following:	12 B2	
			•	350	
		CHRI	STOPHER SPRINGHORN	China .	
F			Name of Person	(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
		CHRISTO	PHER SPRINGHORN CPA PA	D.C.	
'ì			Firm/Company		
		601-C	PONCE DE LEON BLVD S		
8)			Address		
		ST	AUGUSTINE, FL 32084		
			City/State and Zip Code		
T		E-mail address: (IORNCPA@BELLSOUTH.NET to be used for future annual report notification)		
For furthe	r information c	concerning this matter, please o	eall:		
ı	CHRISTOR	PHER SPRINGHORN	at (904) 827-0088		
		of Person	at (904) 827-0088 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	S55.00 Filing Fee & S60.00 Filing Fee & Certified Copy Certificat (additional copy is enclosed) Certified	e of Status &	
8)			(addition	al copy is enclosed)	
n.		ING ADDRESS:	STREET/COURIER ADDRESS:		
î i.	Divisio	ration Section on of Corporations	Registration Section Division of Corporations		
1. E		ox 6327 assee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION , OF

B NG 25 PH 2: 55

TALLAHAS SEE, FLORIDA

ds.

	CO OF ST AUGUS							
(Name of the Limiter	(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 L	iability Company were fil	cd on	JULY 1, 2009	and assigned				
Florida document number L0900006	3969							
This amendment is submitted to amend the foll	lowing:							
A. If amending name, enter the new name of	of the limited liability con	npany her	g:					
SONC	OCO OF ST AUGUST	INE II LL	.C					
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liabi	lity Compa	ny," the designation "L	_C" or the abbreviation				
Enter new principal offices address, if applications	cable:							
(Principal office address MUST BE A STREE	ET ADDRESS)							
ជួ								
Enter new mailing address, if applicable:								
(Mailing address MAY BE A POST OFFICE	BOX)							
B. If amouding the registered agent and registered agent and/or the new registered of		iress on o	our records, enter th	e name of the new				
7. 1 1								
Name of New Registered Agent:								
New Registered Office Address:								
E	Enter Florida street address							
<u>a</u>			, Florida					
*	City			Zip Code				
New Registered Agent's Signature, if changing	Registered Agent:							
Thereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as reg being filed to merely reflect a change in the	proper and complete per istered agent as provide	formance d for in Cl	of my duties, and I a hapter 608, F.S. Or, i	m familiar with and if this document is				

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

Ü 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** ☐ Add Remove 1 4 ☐ Add Remove <u>N</u> ☐ Add Remove /12 Add Remove 1 □Add Remove ∏Add 7.5 5.6 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) C.T. Ą AUGUST 251 2009 Dated r_i^* Signature of member of authorized representative of a member ٠. HAGOS FISSHAYE

15

Œ,

拼编

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00