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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

\*\*Enter the email address for this business entity to be used for future? annual report mailings. Enter only one email address please. \*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EXPORT DIESEL LLC

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PAGE 01/03

EMPIRE CORP KIT

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	HESEL LLC			
(Name of the Limited Hability Comp (A Florida Limited	any as it now appea Liability Company)	rs on our records.)	<del>-</del>	
The Articles of Organization for this Limited Liability Compan	y were filed on	09/21/2009	and assigned	
Florida document number L0900009114				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company he	n <u>e</u> :		
The new name must be distinguishable and end with the words "Lin-L.L.C."	nited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applies ble:				•
Principal office address MUST BE A STREET ADDRESS				
			TAS BY	وسند
	_		158 E	11
Enter new mailing address, if applicable:			=======================================	-
(Mailing address MAY BE A POST OFFICE BOX)			S 20	in
	·		mig =	-
B. If emending the registered agent and/or registered o registered agent and/or the new registered office address he	ffice address on ( re:	oar records, <u>enter tl</u>	te name of the new	
Name of New Registered Agent:				
New Registered Office Address:	·			
	ess			
		, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>u</u>			

Thereby appears the appointment as registered agent and agree to act in this canoning

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 um 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

## or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	CARLOS J FIGUEROA	1455 NE 129 STREET B NORTH MIAMLEL 33161	Add Remove
			Add Remove
			Add Remove
<del></del>			Add
			_∏Add _∏Remove
			TASE T
D. <b>பி ஓ</b> றைவ் ——	ng any other information, enter change(1	s) here: (Attach additional sheets, if necessary.)	IL TO M 8: 12  HASSEE, FLORIDA
			- ** -
Dated	X. 2017	authorized representative of a member	
	MIGUEL E	FIGUEROA  printed name of signee	idd a mit digwyru.

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