L10000013412

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COVER LETTER

	istration Sect				
SUBJECT:	NEXL	UBE TAMPA	LLC		
SUBJECT,		Name of Limite	ed Liability Company		
The enclosed	I Articles of A	mendment and fee(s) are subr	nitted for filing.		
Please return	all correspond	dence concerning this matter t	to the following:		
		Jane Henson			
			Name of Person		
	McAfee & Taft A Professional Corporation				
		Firm/Company			
		10th Fl., Two Leaders	hip Square, 211 N. Robinson,		
			Address		
		Oklahoma City, OK 7	3102		
			City/State and Zip Code		
		E-mail address: (to be used for future annual report notification)			
For further i	nformation cor	neerning this matter, please ca	all:		
Jane He	nson		at (405) 552-2362		
	Name of I	Person	Area Code & Daytime Te	lephone Number	
Enclosed is	a check for the	following amount:			
□ \$25.00 F	iling Fee	□\$30.00 Filing Fee & Certificate of Status	当\$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

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2013 SEP 18 PM 1: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA

NEXLUBE TAMPA LLC (Name of the Limited Liability Come) (A Florida Limited	pany as it now appears of d Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Comparation for the Limited Liability Comparation document number <u>L10000013412</u> .	ny were filed on Febr	uary 4, 2010	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li-	ability company here:		
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company	," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	16803 North D	allas Parkway	
(Mailing address MAY BE A POST OFFICE BOX)	Addison, TX 75		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our ere:	records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street address	8
		, Florida	
	City		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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action <u>Title</u> Name Address **ENZIO D'ANGELO** 951 Yamato Road, Suite 202 **MGR** Boca Raton, FL 33431 MRG 4801 GAILLARDIA PARKWAY, SUITE 350 RIATA MANAGEMENT, LLC Oklahoma City, OK 73142 Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) The address of each of the following managers, N. Malone Mitchell 3rd,
Monte Bell, and Noah Mitchell 4th, is hereby changed to
"16803 North Dallas Parkway, Addison, TX 75001."
Dated September 14 , 2013 .
Seg to
Signsture of a plember or authorized representative of a member N. Malone Mitchell 3rd, manager of NexLube Management LLC, the manager of the sole member
Typed or printed name of signee

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Filing Fee: \$25.00

SECRETARY OF STATE