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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Co					
Hard On O	ril, LLC				
SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	·		
Please return all correspo	ondence concerning this matter	to the following:			
	Nancy J. Flint, Esq.				
		Name of Person			
	Nancy J. Flint, Attorney A	t Law, P.A.			
		Firm/Company			
	1856 N. Nob Hill Road, #	124			
	-	Address			
	Plantation, Florida 33322				
		City/State and Zip Code			
	nancy@flintiplaw.com			295	
		to be used for future annual report notifical	tion)	3	
For further information c	oncerning this matter, please ca	all:	·	- 68 <u>-</u>	Damei.
Nancy J. Flint		954 812-0660 at ()			3
Name o	f Person	Area Code Daytime Te	elephone Number	H 4: 12	
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

Hard On Oil, LLC		
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	,,,,, ,
The Articles of Organization for this Limited Liability Company	were filed on October 6, 2010	and assigned
Florida document number L10000104357		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
Phantaslube LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	1411B Sawgrass Corporate Parkway	N3
(Principal office address MUST BE A STREET ADDRESS)	Sunrise, Florida 33323	Total Continue
		A company
		SS - T
Enter new mailing address, if applicable:	1856 N. Nob Hill Road, #424	
(Mailing address MAY BE A POST OFFICE BOX)	Plantation, Florida 33322	
		<u> </u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u></u>	the name of the ne
	Enter Florida street address	
·	, Florida	Zip Code
New Registered Agent's Signature if changing Degistered Agents	•	esp 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or removed from our reco	oras:		
MGR = `Manager AMBR = Authorized Me	mber		

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
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			Remove
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effective da	ite is listed, the date ate inserted in thi	must be specific a	and cannot be price	or to date of filing	or more than 90 of	lays after filing.)	Pursuant to 60000
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Filing Fee: \$25.00