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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
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EXAMINER

COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: POWERFUEL CNG CONVERSION SYSTEMS LLC Name of Limited Liability Company |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| LOUIS W. HERRING Name of Person POWERFUEL CNG CONVERSION SYSTEMS LLC Firm/Company 650 NW 27 Avenue Address Fort Landevdale FL 33311 City/State and Zip Code Louis @ powerfuel Cng. Com E-mail address: (to be used for future annual report notification) F. T. T. |
| For further information concerning this matter, please call: Louis Herving at (954) 695-77777 |
| For further information concerning this matter, please call: Louis Herving Name of Person Area Code & Daytime Telephone Number Name of Person Name of Person |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} |

TO:

Registration Section

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

POWERFUEL CNG CONVERSION SYSTEMS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

| | City | Zip Code |
|---|--|---------------------------|
| | , Florida _ | |
| | Enter Florida street ac | ddress |
| New Registered Office Address: | • | |
| Name of New Registered Agent: | | |
| registered agent and/or the new registered office add | | the name of the new |
| B. If amending the registered agent and/or regis | tourd office address on our records onto | |
| | | LORIDE |
| Mailing address MAY BE A POST OFFICE BOX) | | FL0 |
| Enter new mailing address, if applicable: | • | 29 PH |
| Principal office address MUST BE A STREET ADDI | (ESS) | E E 1 |
| Enter new principal offices address, if applicable: | | 15.5 12 12.5 12 |
| The new name must be distinguishable and end with the wo "L.L.C." | rds "Limited Liability Company," the designation | "LLC" or the abbreviation |
| POWERFUEL CNG SY: | STEMS IIC. | |
| A. If amending name, enter the new name of the lim | ited liability company here: | |
| This amendment is submitted to amend the following: | | |
| Florida document number L100001310- | 18 | |
| The Articles of Organization for this Limited Liability (| | and assigned |

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 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 Title <u>Name</u> **Address** Type of Action Simcha E. Herring Add Remove ☐ Add Remove Add 🔲 Remove Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 20 Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00