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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

Division of Corporations			
SUBJECT: TEXN MEX PTO VENTULES 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:			
MARC ENELMAJ Name of Person TEX N MEX 2TO VENTURE LLC			
TEXNMEX RTO VENTURED LLC Firm/Company			
6608 ADAMO DrIVE			
City/State and Zip Code MRCCBUDDY PLATS. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
MARC EDEZMAN at (813) 376.6335 Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
□ \$25.00 Filing Fee Certificate of Status C			

MAILING ADDRESS:

TO: Registration Section

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

, - , - , - , - , - , - , - , - , - , -	-
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L 11000007498</u> .	Ion JANUALY 20, 201 and assigned
this amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: the new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the liberviation "LLC" or the libe	
	The new name must be distinguishable and end with the words "Limited Liability Compa
Enter new principal offices address, if applicable:	() - 1
(Principal office address MUST BE A STREET ADDRESS)	m,
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address here:	ress on our records, enter the name of the new
Name of New Registered Agent:	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member Type of Action **Address** Title Name Terry Beville 6608 Adamo Drive MGR **■** Add Tampa, FL 33619 ☐ Remove 3310 Silver Pond Drive Steve Mathis MGR Add Plant City, FL 33566 Jim Duke 4330 Strauss Road MGR Plant City, FL 35635 ☐ Remove Joe Bob Ellis 6709 86th Street MGR ■ Add Lubbock, TX 79424 □ Remove Darryl Franklin 2400 Rou □ Add

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
E. Effec (The ef the da	tive date, if other than the date of filing:	
Dated	MAZCH, 20, 2014.	
	Signature of a member or authorized representative of a member	
	Marc Edelman	
	Typed or printed name of signee	14 AP
	ÄSSEE,	-0 - - - - - - - -
	FLORIDA	R M

Page 3 of 3

Filing Fee: \$25.00