

L12000002241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

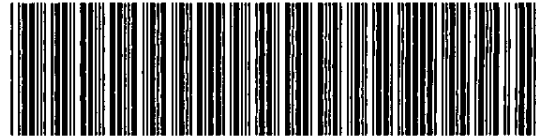
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700224874517

03/19/12--01025--008 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 MAR 19 AM 11:46

FILED

D. BRUCE

MAR 20 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Core Energy Resources 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:

William Gracyalny

Name of Person

Core Energy Resources LLC

Firm/Company

1840 Main St

Address

Dunedin FL 34698

City/State and Zip Code

wgracyalny@yesdep.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Gracyalny

Name of Person

at (727)

442-4869
Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 MAR 19 AM 11:46

FILED

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Core Energy Resources LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1/5/2012 and assigned
Florida document number L12000002241.

This amendment is submitted to amend the following:

A. 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 abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1840 Main St
Dunedin FL 34698

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1840 Main St
Dunedin FL 34698

FILED
12 MAR 19 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

William Gracyalny

New Registered Office Address:

1409 Arden Ave

Enter Florida street address

Clearwater

Florida

33755

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Owner	Melissa Kawczak	3907 Millpond Ct #153 Palm Harbor FL 34684	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Owner	Jacqueline Cerda	2489 Chaucer St Clearwater FL 33765	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
12 MAR 19 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated March 13, 2012

Signature of a member or authorized representative of a member

Typed or printed name of signee Jacqueline Cerda