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(City/State/Zip/Phone #)

☐ PICK-UP

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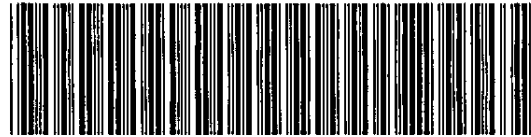
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fuel Additives 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:

Pamela Walker

Name of Person

Fuel Additives, LLC

Firm Company

1328 Hwy A 1A

Address

Seaside Beach, FL 32937

City/State and Zip Code

* Paul Meyer Walth
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pamela Walker

Name of Person

at ()

Area Code & Daytime Telephone Number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Fuel Additives 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 9/17/12 and assigned
Florida document number 412000118382

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

Anastasia Walker

New Registered Office Address:

Enter Florida street address

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

MGR = Manager
MGRM = Managing Member

MGRM	<u>Pamela Walker</u>	<u>1328 Hwy A1A</u>	Add
		<u>Satellite Beach FL 32937</u>	<input checked="" type="button" value="Remove"/>

<u>MGRM</u>	<u>Christopher Walker</u>	<u>1328 Hwy A1A</u>	<u>Satellite Beach FL 32939</u>	<u>Add</u>
				<u>Remove</u>

MORM	<u>Joel Arberman</u>	<u>1328 Hwy A1A</u>	Add
		<u>Satellite Beach FL 32939</u>	Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Summary

Add

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

Dated July 18, 2013.

*

Signature of a member or authorized representative of a member

Pamela Walker

Typed or printed name of signee

Page 3 of 3

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