# L13000056974

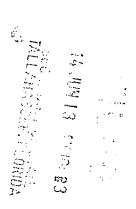
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#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SRIJI PETROLIUM LLC

SUBJECT:

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:

## **HERMAN SINGH**

Name of Person

#### **HERMAN SINGH & ASSOCIATES INC**

Firm/Company

#### 600 RINEHART RD #3118

Address

### LAKE MARY FL 32746

City/State and Zip Code

#### SHAGERDY@GMAIL.COM

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

For further information concerning this matter, please call:

## **HERMAN SINGH**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 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

#### SRIJI PETROLIUM LLC

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

(A F	lorida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L13000056974	ity Company were filed on 4/8/2013	and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the word	s "Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	<del> </del>
		<del></del> .
F		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		<del></del>
	egistered office address on our records, enter	the name of the new
registered agent and/or the new registered office	address nere:	
Name of New Registered Agent:		پ. در :
		7
New Registered Office Address:	Enter Florida street address	
	F1 . 1	چر و بر المسلم
-	, Florida	Zij Code
New Registered Agent's Signature, if changing Regis	tered Agent:	
provisions of all statutes relative to the proper ar accept the obligations of my position as registere	ent and agree to act in this capacity. I further agreed complete performance of my duties, and I am feed agent as provided for in Chapter 605, F.S. Or, stered office address, I hereby confirm that the lingue.	amiliar with and if this document is
•	If Changing Registered Agent, Signature of New Res	zistered Agent

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member <u>Title</u> Name **Address** Type of Action MGR **PULIN PATEL** 1205 N. JOHN YOUNG PARKWAY **■** Add KISSIMMEE, FL 34741 ☐ Remove □ Add \_□ Remove □ Remove □ Add ဏ ယ \_□ Add □ Remove

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