

L130000061948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

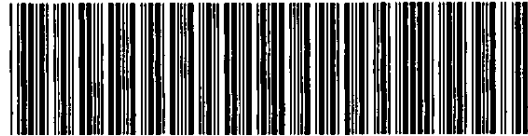
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 SEP 30 PM 3:34

OCT - 1 2013

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **J&L Oil Company 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:

Leslie Delgado

Name of Person

J&L Oil Company LLC

Firm/Company

3040 W. Vine Street

Address

Kissimmee, Florida 34741

City/State and Zip Code

jorgejriviera8@gmail.com

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

For further information concerning this matter, please call:

Jaime Luis Reyes

Name of Person

321 527-0263

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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 SEP 30 PM 3:34

J&L Oil Company 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 04/29/2013 and assigned
Florida document number L13000061948.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

J&L Oil Company LLC

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)

3040 West Vine Street

Kissimmee

Florida, 34741

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3040 West Vine Street

Kissimmee

Florida, 34741

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:

Leslie Delgado

New Registered Office Address:

3040 West Vine Street

Enter Florida street address

Kissimmee

, Florida 34741

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.

x Leslie Delgado
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>
MGR n62n	Jorge Rivera	3040 West Vine Street	<input type="checkbox"/> Add
		Kissimmee, FL 34741	<input checked="" type="checkbox"/> Remove
MGR n62n	Leslie Delgado	3040 West Vine Street	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34741	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

FEI/EIN Number 46-2640332

Dated September 25, 2013.

x Leslie Delgado

Signature of a member or authorized representative of a member

Leslie Delgado

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00