Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number: I20000000205 Phone

: (305)416-6800

Fax Number

: (305)416-6811

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please. **

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LEMARTEC ENERGY, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

DEC 1 8 2013

COVER LETTER

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TO:

Registration Section Division of Corporations

LEMARTEC ENERGY, 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:

Diane M. Hernandez

Name of Person

Adams Gallinar, P.A.

Firm/Company

1000 Brickell Avenue, Suite 300

Miami, Florida 33131

City/State and Zip Code

dhernandez@agilaw.com

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

For further information concerning this matter, please call:

Diane M. Hernandez

at (305)416-6800

Area Code & Daytime Telephone Number

Name of Person

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 Tallahassec, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

LEMARTEC ENERGY, LLC

(((H130002764203)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Li (A F)	ability Company as it now appears on o orida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liab Florida document number L13000172855	nility Company were filed on Decemb	per 13, 2013 And assumed
This amendment is submitted to amend the follow	_	ASSET I
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Company," the	ne designation "LLC" of the abbreviation
Enter new principal offices address, if applicab	ile:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	220	
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Entay Fl	orida street address
	Driver Pa	
	City	, Florida Zip Code
N = 7 1 = 1 1 1 1 1 1 1 1 1		- <i>p</i>

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

Page 1 of 3

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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>	Address	Type of Action
MGR	Guillermo R. Garcia Tunon	11740 SW 80 St.	Add
		Third Floor	Remove
		Miami, Florida 33183	
MGR	Jose J. Garcia Tunon	11740 SW 80 St.	Add
		Third Floor	Remove
		Miami, Florida 33183	
			Add
			Remove
		<u> </u>	
			Add
			ASS Remove
			图片工
	·		SSET OF THE PARTY
			Remove
			
			Add
			Remove
			

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D. If amending any other information, enter change(s) here: (Attach additional sheets	, if necessary.)
	•
December 17 2013	
Radams	
Signature of a member or authorized representative of a mem	ber
Robert R. Adams, Authorized Representative	
Typed or printed name of signec	

Page 3 of 3

Filing Fee: \$25.00

