

L140000 68039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

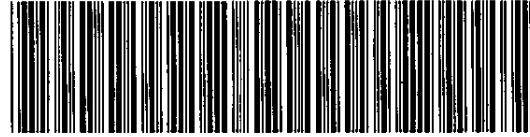
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 MAY 11 AM 7:57

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Petroleum Group 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:

Dennis A Soucek JR  
Name of Person

Petroleum Group LLC  
Firm/Company

920 NE 16th STREET  
Address

OCALA, FLORIDA 34470  
City/State and Zip Code

Dennis@PetroGroupFL.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dennis A Soucek JR at (352) 304-5500  
Name of Person 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**

Petroleum Group 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 4/28/2014 and assigned Florida document number L14000068039.

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 contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Dennis A. Soucek JR

New Registered Office Address:

920 W. 11th Street

Enter Florida street address

Ocala

City

, Florida

34470  
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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u>           | <u>Name</u>   | <u>Address</u>          | <u>Type of Action</u>                      |
|------------------------|---------------|-------------------------|--------------------------------------------|
| MGR<br><del>AMBR</del> | Fazal, Sadiq  | 929 NE 16th STREET      | <input type="checkbox"/> Add               |
|                        |               | OCALA FL 34470          | <input checked="" type="checkbox"/> Remove |
|                        |               | (Remove from Documents) | <input checked="" type="checkbox"/> Change |
| MGR<br><del>AMBR</del> | Saucy, Dennis | 929 NE 16th STREET      | <input type="checkbox"/> Add               |
|                        |               | OCALA FL 34470          | <input type="checkbox"/> Remove            |
|                        |               | (Make Manager)          | <input checked="" type="checkbox"/> Change |
|                        |               |                         | <input type="checkbox"/> Add               |
|                        |               |                         | <input type="checkbox"/> Remove            |
|                        |               |                         | <input type="checkbox"/> Change            |
|                        |               |                         | <input type="checkbox"/> Add               |
|                        |               |                         | <input type="checkbox"/> Remove            |
|                        |               |                         | <input type="checkbox"/> Change            |
|                        |               |                         | <input type="checkbox"/> Add               |
|                        |               |                         | <input type="checkbox"/> Remove            |
|                        |               |                         | <input type="checkbox"/> Change            |
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|                        |               |                         | <input type="checkbox"/> Change            |

15 M/

2100

ITALIA

15 MAY 11 AM 09:57  
STANDARD TIME  
MILWAUKEE WISCONSIN

( ) Pursuant to 605.0207  
te will not be listed as

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 5 - 7, 2015

2462

Signature of a member or authorized representative of a member

Dennis A. Spacey Jr.

Typed or printed name of signee