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(((H15000116496 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GUTTA SHARFI & CO.

Account Number : Il9990000055

Phone Fax Number : (954)452-8813 : (954)452-8359

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREEN GAS OF FLORIDA LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Green Gas of Florida LLC		
(Name of the Limitor	d Liability Company as it now appents on on A Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Lia Florida document number L15000078605		olf and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, <u>citter the new name of</u>	the <u>limited liability company here</u> :	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
<u> Principal office address MUST BE A STREE</u>	ADDRESS	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE I	<u></u>	
B. If amending the registered agent and/oregistered agent and/or the new registered of		records, enter the name of the r
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet address
	Ema Eigenia 30	
	City	, Florida 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

H150001164963

H May. 13. 2015/11:49AM/6.	May. 13. 2	2015 / 11:4	9AN/6.	3
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No. 3553 P. 3

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

Title	Name	Address	Type of Action
MGR	Yosef Baruch	7280 W Palmetto Park Rd #203	
		Boca Raton, FL 33433	_
		· ·	Change
			Remove
			Change
			Add
1	•		☐ Remove
			☐ Change
			□ Add
			□ Remove
`			☐ Change
			□ Remove
			☐ Change
			_Q Add
			☐ Remove
			☐ Change

hay. 13. 2015 (11:49AM)	No. 3553 P. 4
amending any other information, enter change(s) here: (Attach additional shee	ets, if necessary.)

	N.,
·	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than	(optional)
tote: If the date inserted in this block does not meet the applicable statutory fiting require	ements, this date will not be listed as
ocument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, a	t 12:01 a.m. on the earlier of
The 90th day after the record is filed.	
Dated May 13 , 2015	
Dated May 13 , 2015	
Signature of a member or authorized representative of a me	mher
Signature of a memoer of authorized representative of a me	.
Frank Gutta	

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Filing Fee: \$25.00