115000079833

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

LAKE PAN	IASOFFKEE FUELS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	DOMINIC JOHN		
		Name of Person	· ·
	DJ&J ASSOCIATES		
		Firm/Company	
	2400 SE 36TH AVE		
		Address	
	OCALA, FL 34471		
		City/State and Zip Code	
	DJ_VENAD@YAHOO.C		
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
DOMINIC JOHN		352 6942004	
Name o	f Person	at ()	Telephone Number
Enclosed is a check for th	ne following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filipp Fee. 6	□ \$60.00 Filling Face
325.00 Fitting rec	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

LAKE PANASOFFKEE FUELS LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w	ere filed on 05/16/2015 and assigned
Florida document number L15000079833	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbre ion "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PH 6: 12
B. If amending the registered agent and/or registered officered agent and/or the new registered office address here:	ce address on our records, enter the name of the i
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
M	SUNIL RUSTAGI	B 2003, ELDORA.	□ Add
		HIRANANDA	■ Remove
		MUMBAI, 40007-6 IN UN	☐ Change
М	KARAMTARA USA INC	293 E C 470	= Add
		LAKE PANASOFFKEE	□ Remove
		FLORIDA 33538	☐ Change
			Remove SEGRE DE AND
			OR Remove
			Change
			□ Add
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ffective date, if an effective date is Note: If the date is ocument's effecti	listed, the date mu- inscrted in this b	st be specific and c lock does not mo	cannot be prior to cet the applicabl	late of filing or more	than 90 days afte	ional) r tiling.) Pursuant to 605,02 is date will not be listed
			ite, but not a	n effective tim	e, at 12:01	a.m. on the earlier
The 90th day) J. 25 20	6)6		. ed representative of a		

Page 3 of 3

Filing Fee: \$25.00