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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
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COVER LETTER

Division of C			,
HENG P	ETROLEUM LLC		
30bJEC1:	Name of Lim	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	ALEEM KANJI		
		Name of Person	
	FINANCIAL ACCOUNT	ING SERVICES PLC	
		Firm/Company	
	730 W COLONIAL DR.		
	,	Address	
	ORLANDO, FL 32804		
		City/State and Zip Code	·
	-		
•	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
Name of Person FINANCIAL ACCOUNTING SERVICES PLC Firm/Company 730 W COLONIAL DR. Address ORLANDO, FL 32804			
Name	of Person	Area Code Daytim	e 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

2015 JUL 23 AN II: 45 SECIETARY OF STATES

TALL APASSEE, FLORIDA

HENG PETROLEUM 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 L	iability Company were filed or	n <u>06/02/15</u> and assigned
Florida document number L15000096290		
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	of the limited liability compan	y 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 applie	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	or registered office address	s on our records, enter the name of the new
Name of New Registered Agent:	LEANGSRUN ING	
New Registered Office Address:	520 WOODLAND CREEK I	BLVD
	Enter	- Florida street address
	KISSIMMEE	, Florida
	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 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>	Type of Action
MGR	THIDA ING	520 WOODLAND CREEK BLVD	
		KISSIMMEE, FL 34744	⊑ Remove
			Change
			Add
			Remove
	•		□ Change
<u>_</u>			
			□ Remove
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