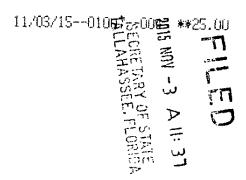
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bullet Toel 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:	
Osmany Jardines	
Bullet Fuel LLC Firm/Company	
780 E, 49 st Address	·
Hialean, FL 33013 City/State and Zip Code	
rebeca diez Q yahoo com E-mail address: (to be used for futurounnual report notification)	
For further information concerning this matter, please call:	20: TAI
Osmany Javaines at (7816) 295-2050 Name of Person Area Code Daytime Telephone Number	ZOUR NOV -3
Enclosed is a check for the following amount:	ing F STATE STATE STATE OF STATE STA
(additional copy is enclosed) Certified	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bullet Fuel 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 Comp	any were filed on	102 2015 and assigned
Florida document number <u>L15000096569</u>		
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 L	iability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		Fo B
(Principal office address MUST BE A STREET ADDRESS		70 2
		mo > m
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	,	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida si	reet address
		, FloridaZip Code
	·	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compaction the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance of my a as provided for in Chap	duties, and I am familiar with and ter 605. F.S. Or, if this document is
117	Changing Registered Agent. 9	Signature of New Registered Agent

MGR = M $AMBR = A$	lanager authorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	Lebeca Diez	780 E 49 St. Hialean, FL 33013	🗖 Add
			. □ Remove
	·		☐ Change
- 100			
			□ Remove
			Change
	AMAN AND A SECOND CONTRACTOR OF THE PROPERTY O		D Add
·			. □ Remove
		SECRETAR LIAHAS SECRETAR SECRE	_0\)dd
			Enmove Company Compan
			_□ Remove
			Change
-			Add
			Remove
			□ Change

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

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	P
Iffective date, if other than the date of filing:	(optional)
fan ell'ective date is listed, the date must be specific and cannot be prior to date of filing or more than 9 Note: If the date inserted in this block does not meet the applicable statutory filing require locument's effective date on the Department of State's records.	10 days after filmg.) Pursuant to 605.0207 (ements, this date will not be listed as th
e record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed.	: 12:01 a.m. on the earlier of:
Dated October 28m 2015	
	agentament of the second of th
Signature of a member or authorized representative of a men	iber

Page 3 of 3

Filing Fee: \$25.00