L15000120655

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1 0 :	Division of Corporations		
	EVEN PETROLEUM LLC	ئ _ى ؛	
SUBJE		imited Liability Company	
The encl	losed Articles of Amendment and fee(s) are st	abmitted for filing.	
Please re	eturn all correspondence concerning this matte	er to the following:	
	GOVINDARAJU RUDF	RAPATNA	
		Name of Person	Marie Carlos Car
	RELIANCE CONSULT	ING LLC	
		Firm/Company	_
	13940 N.DALE MABRY	Y HWY	
		Address	_
	TAMPA,FL-33618		
		City/State and Zip Code	_
	RAJU@RELIANCECPA		
T		; (to be used for future annual report notification)	
For Turti	ner information concerning this matter, please	call:	
GOVIN	DARAJU RUDRAPATNA	813 931-7258 at ()	
	Name of Person	Area Code Daytime Telephone Number	er
\mathbf{O}	d is a check for the following amount: .00 Filing Fee	□-\$55:00-Filing-Fee-&□-\$60.00-F Certified Copy Certific	iling Fee; ————————ate of Status &
<i>(</i>	Continued of States	(additional copy is enclosed) Certifie	
		(action)	r copy in choloscay
	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

EVEN PETROLEUM LLC								
(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our records. nited Liability Company))						
The Articles of Organization for this Limited Liability Comp Florida document number <u>L15000120655</u>	pany were filed on JULY 14,2015	and assigned						
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	<u> </u>							
		D						
Enter new mailing address, if applicable:		S S						
(Mailing address MAY BE A POST OFFICE BOX)		HA TO						
		SSE 25						
		9 3 10						
B. If amending the registered agent and/or registere	d office address on our records,	enter the mame of the no						
registered agent and/or the new registered office address		表点 5 * 9 m 3						
Name of New Registered Agent:	·							
New Registered Office Address:	•							
New Registered Office Address.	Enter Florida street address							
	, Flor	ida						
	City	Zin 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	KUMAR SUJET	10108 LAKE COVE LN	Add			
		TAMPA,FL-33618	☐ Remove			
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