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COVER LETTER

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Tallahassee, FL 32314

TO: Registration 8 Division of Co			
	Group, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jose J. Leonardo, Esq.		
		Name of Person	
	Law Offices of Jose J. Leo	nado, Esq.	
		Firm/Company	
	500 S. Dixie Highway, Sui	ite 204	
		Address	
	Coral Gables, FL 33146		
		City/State and Zip Code	
	jose.leonardo@jleonardolav		
For further information	e-man address: (to be used for future annual report notall:	uncation)
Jose J. Leonardo		305 275-9177 at ()	
Name	of Person	Area Code Daytir	ne 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 Addre		Street Address:	
Registration Section Division of Corporations		Registration So Division of Co	
P.O. Box 63	•	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADRIMAR GROUP, 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 Company were filed on $\frac{7/16/2015}{1}$ and assigned Florida document number L15000122482 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ADRIMAR ENERGY, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 500 S. Dixie Highway, Suite 202 Enter new principal offices address, if applicable: Coral Gables, FL 33146 (Principal office address MUST BE A STREET ADDRESS) 1172 S. Dixie Highway, #487 Enter new mailing address, if applicable: Coral Gables, FL 33146 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Jose J. Leonardo, Esq. Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

500 S. Dixie Highway, Suite 204

City

Coral Gables

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

. Florida <u>33146</u>

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>	Name	Address	Type of Action
MGR	Juan Angel Bueso	1172 S. Dixie Highway, #487	= Add
		Coral Gables, FL 33146	□Remove
			Change
MGR	Jose J. Leonardo	1172 S. Dixie Highway, #487	■Add
		Coral Gables, FL 33146	□Remove
			☐Change
			□ Add
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			Change.

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f an ef <u>Note:</u>	ive date, if other than the date of filing:
e reco rd is ti	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	March 30 2021
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00