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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DREFFEN 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:
James Nefferdorf Name of Person
Firm/Company
-1898 S. Clyde Morris Blud # 500
Daytona Beach FL 32119 City/State and Zip Code Jime gasstations usa. com E-mail address: (to be used for future annual report notification)
Find address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (386) 846 4202 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution See

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

DREFFEN	LLC	
(Name of the Limited Lia (A Fle	ibility Company as it now appears on our brida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liabilit		and assigned
This amendment is submitted to amend the following	y.	
A. If amending name, enter the new name of the I JAMES EDWARD NEFF The new name must be distinguishable and contain the words."	ERDORF LLC	1 "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	Z2 # C22
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our re ddress here:	cords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		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 jamiliar 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>	Name	<u>Address</u>	Type of Action
MGR	KERI C. NEFFERDORF	1898 S. Clyde Morris Blvd suife 500 Dayfong Beach FL 32119	Add
		Daytona Beach FL 32119	Remove
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Note: If the document's of the record s	te, if other than the date of filing: July 15 th , 2017 (optional) date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list effective date on the Department of State's records.	ted
Dated OC	DUNALLY SE	
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•	Typed of printed name of signee	•
	Page 3 of 3	

Filing Fee: \$25.00