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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

CIUD IF CT.	DIAMOND GAS, LI	LC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filling.		
Please return all corres	pondence concerning this matter	to the following:		
	LEO	NARD G. MARTINEZ		
Name of Person				
	Γ	DIAMOND GAS, LLC		
		Firm/Company		
2188 NW20 ST				
		Address		
		MIAMI FL 33142	·	
		City/State and Zip Code		
	MYBUSINESSCARLI@G			
	E-mail address: (to be used for future annual report noti	fication)	
For further information	concerning this matter, please ca	all:		
LEONARD MARTINEZ G		786 553-1584		
Name	of Person		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)	
Regi Divi	ILING ADDRESS: stration Section sion of Corporations Box 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	าก	

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIAMOND GAS, 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 11/07/2016	and assigned
Florida document number L16000204608	
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)	
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, registered agent and/or the new registered office address here:	enter the name of the nev
registered agent and/or the new registered while address neve.	
Name of New Registered Agent:	122 OI T
New Registered Office Address:	
Enter Florida street address	
	rida
Cin	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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	LUIS E, APA		
		11900 N.BAYSHORE DR.#6 NORTH MIAMI	■ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			Change
			19 dd
			- 2 - □ Remove
			Bern See See See See See See See See See Se
			☐ Remove
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			□ Remove
			☐ Change

). If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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VIII.		•
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) P Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	ursuant to If not be l	605.0207 (3)(b) listed as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. or b) The 90th day after the record is filed.	the ea	rlier of:
Dated JULY 8TH 2019		
Signature of a member or authorized representative of a member		
LEONARD G. MARTINEZ Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00