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JUN 15 2019 I ALLERITTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Whats In Yo	OUR TANKLLE
Name of Lingued Lia	ability Company
The enclosed Articles of Amendment and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
<u>Susan</u>	Rame of Person
	1001 TANK? LLC.
4947 Mart	Well Loop Address
Land D'L	alles, 5/ 34638
IN CO10 580	State and Zip Code CNULL Com- sed for future annual report notification)
For further information concerning this matter, please call:	
SUSAN K. Insal	at (813) 363-87/6 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
_	\$55,00 Filing Fee & Sound Filing Fee, Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Calditional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	STREET/COURIER ADDRESS: A Registration Section Division of Corporations Clifton Building

Tallahassee, Fl. 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Whats IN Your	TANK! LL	
(<u>Name of the Limited Liability Co</u> (A Florida Lin	ompany as it now appears on our aited Liability Company)	records.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>4 /6000 2 083 40</u>	pany were filed on	4/2016 and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	S)	
		13
	<u> </u>	2 2
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		37
Manag waaress meet meet of their more	4	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our i here:	records, enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
	······································	, FloridaZip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>tent:</u>	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered opposition has been notified in writing of this change.	olete performance of my du t as provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
lir	Changing Registered Agent, Sig	nature of New Registered Agent

Page 1 of 3

	ing Authorized Person(s) authorized to ma ed from our records:	inage, enter the title, name, and address of each j	person being add
	Manager Authorized Member		
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MGR	Scott, WAYNEL.	3900 106th AVENOITH Cleanwater, F1 33762	
			Remove
			☐ Change
			□ Remove
			🗆 Change
			Add
			□ Remove
			🗆 Change
			□ Add
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Effective date, if other than the date of filing: Can effective date, if other than the date of filing: Can effective date is fissed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be locument's effective date on the Department of State's records. The 90th day after the record is filed. Signature of a member or adminized representative of a member SUSAN K. TNGOLAN		
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		<u> </u>
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Typed or printed name of signee	//	

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Filing Fee: \$25.00