# 117600015058

(Re	questor's Name)	-
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	⊋#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
I		

Office Use Only



100304079191

10/18/17--01009--028 \*\*25.00

FILED
FILED

# **COVER LETTER**

TO:		stration Section of Corp			
SUBJEC	~т.	LPS Diesel I	loldings LLC		
SODJEC	··· .		Name of Limi	ited Liability Company	<del></del>
The enct	losed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please re	eturn a	all correspon	dence concerning this matter	to the following:	
			Peter Rickloff		
				Name of Person	<del> , .</del>
			LPS Diesel Holdings LLC		
				Firm/Company	
			528 Manns Harbor Dr		
				Address	<del> </del>
			Apollo Beach, FL 33572		
				City/State and Zip Code	
			rickloff001@gmail.com		
			E-mail address: (1	to be used for future annual report not	ification)
For furth	ner int	ormation co	ncerning this matter, please ca	ıll:	
Peter Ri	cklofi	,		814 746-2030 at ()	
	•	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed	d is a	check for the	following amount:		
<b>■</b> \$25,	00 Fi	ling 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 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

LPS Diesel Holdings LLC		
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our record la Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability of Florida document number 1.17000015058	Company were filed on $\frac{1/19/201}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	mited Liability Company." the designation "LLC	or the abbreviation "I.J.C."
Enter new principal offices address, if applicable:		<u>≨ 8 π</u>
Principal office address MUST BE A STREET ADD	RESS)	NASSE TO THE
		E FLORIDATE
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or regi registered agent and/or the new registered office add		s, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	s
	. Flo	orida
<del></del> -	City	7ip 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>	Address	Type of Action
MGR/AMBIZ	Peter Rickloff	528 Manns Harbor Dr	
		Apollo Beach, FL 33572	Remove
			Change
			Add
			☐ Remove
			☐ Change
	·		
			Remove
		<del></del>	☐ Change
<del></del>		<del></del>	□ Add
			Remove
			Change
	<del> </del>		
			□ Remove
			Change
		<u> </u>	Remove
			□ Change

	•			
				•
<del></del>				
	<del> </del>			
			SE SE	
	•		OCT CREI LAH	7
			ASSE ANY	רוי
			7 <b>2</b>	(
<del></del>			ORIOA	5 -
				-
Factive date if other than t	the date of filing.		(antinnal)	
fective date, if other than t an effective date is listed, the date is	must be specific and cannot be prio	r to date of filing or more than	(optional) 90 days after filing.) Pursuant to 605	.0207
becoment's effective date on the	Department of State's records	capie statutory tuing require s.	ements, this date will not be list	ed as
record specifies a delay The 90th day after the r		ot an effective time, a	t 12:01 a.m. on the earli	er o
	2017			
October 16				

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee