

LI7000105537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600304131106

10/10/17--01045--023 **30.00

17 OCT 10 AM 12 49
SECRET FLORIDA

NOT 10 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JC Fueling 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:

Heidy Rodriguez
Name of Person

Union Carrier Services
Firm/Company

5375 NW 74 Ave
Address

Miami FL 33166
City/State and Zip Code

UnioncarrierServices@broadcom.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heidy Rodriguez at (305) 392-1035
Name of Person Area Code Daytime 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 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**

JC Fueling 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 _____ and assigned
Florida document number L17000105537.

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)

825 E 20 St
Hialeah FL 33013

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

825 E 20 St
Hialeah FL 33013

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:

Name of New Registered Agent:

Osmany Aguiar Gomez

New Registered Office Address:

825 E 20 St

Enter Florida street address

Hialeah

City

Florida

Zip Code

33013

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

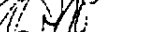
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Osmany	825 E 20 St	☒ Add
	Aguilar Gomez	Hialeah Fl 33013	☐ Remove
			☐ Change
MGR	JOSE A	11510 SW 7 st	☐ Add
	Atienza Concepcion	Miami Fl 33174	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

17 OCT 60 AM 12 49
... 108.5...

7 OCT 60 AM 12 49

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 10/5/2017.

X  Signature of a member or authorized representative of a member

Jose A Atienza

Typed or printed name of signer