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SECRETARY OF STATE STATE SECRETARY OF CORPORATIONS DIVISION OF CORPORATIONS

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## **COVER LETTER**

	tegistration Sec Division of Corp							
cum ir ev		ce Station, LLC						
SUBJECT	ı:	Name of Limited Liability Company						
The enclos	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.					
Please rett	ırn all correspo	ndence concerning this matter	to the following:					
		Ignacio M. Urbieta						
			Name of Person					
		Doral Service Station, LLC						
Firm/Company								
		9701 NW 89th Avenue						
			Address					
		Medley, FL 33178						
			City/State and Zip Code					
		imurbieta@urbietaoil.com  E-mail address: (to be used for future annual report notification)						
For furthe	r information co	oncerning this matter, please ca	·	neanon)				
Ignacio M	I. Urbieta		305 884-0008 x-					
	Name of	Person	Area Code Daytim	e Telephone Number				
Enclosed i	s a check for th	e 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:

1 -- 1

TO:

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

Doral Service Station, LLC	
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) iited Liability Company)
The Articles of Organization for this Limited Liability Comp.  Florida document number L18000067211	pany were filed on 3/14/18 and assigned
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 "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES.	<u></u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registere registered agent and/or the new registered office address	HAY I OF CORPORATION
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 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	Ignacio Urbieta, Jr.	9701 NW 39 Avenue Medlay, FL 33/178	Add
			Remove
		and Mu) sa Avenue	Change
MGR	Guillermo Urbieta	9701 NW 89 Avenue Medley, FL33178	■ Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
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			Change

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ective date, if other than the date of filing: (optional effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing	l) g.) Pursuant to 605	5.0207
e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date ument's effective date on the Department of State's records.	e will not be liste	ed as i
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. he 90th day after the record is filed.	. on the earlie	er of
ed May 15		

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Typed or printed name of signee

Filing Fee: \$25.00