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(Re	questor's Name)	
(Ade	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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DIVISION OF CORPORATIONS

N COOPER MAY 21 2018

COVER LETTER

Div	ision of Corp	orations		
SUBJECT:		vice Station, LLC		
OOD CT		Name of Lim	ited Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Ignacio M. Urbieta		
			Name of Person	
		Paradise Service Station, L	LC	
			Firm/Company	
		9701 NW 89th Avenue		
			Address	 -
		Medley, FL 33178		
			City/State and Zip Code	
		imurbieta@urbietaoil.com		
			to be used for future annual report notific	canon)
For further in	iformation co	ncerning this matter, please ca	all:	
Ignacio M. U			305 884-0008 x- 2 at () Daytime	41
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Paradise Service Station, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 3/14/18	and assigned
Florida document number L18000067229		
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	nited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		18 NVISE
(Principal office address MUST BE A STREET ADD	RESS)	MAY CR
		1 SAT
		₹ 200 200
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		8 70 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
B. If amending the registered agent and/or regi		ter the name of the nev
registered agent and/or the new registered office add	dress here:	
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 O Divorgo	Type of Action
MGR	Ignacio Urbieta, Jr.	9701 NW 39 Avenue Medlay, FL 33178	Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
		0751 N(1) 20 A)05.20	Change
MGR	Guillermo Urbieta	9701 NW 39 Avenue Medley, FL33178	= Add
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an effective date is listed	er than the date of filing:	han 90 days after filing.) Pursuant to 605.0	0207
Note: If the date inser locument's effective d	ed in this block does not meet the applicable statutory filing red ate on the Department of State's records.	quirements, this date will not be listed	d as
	•		
e record specifies	a delayed effective date, but not an effective time	e, at 12:01 a.m. on the earlie	ro
	er the record is filed.		
Nay 15	2018		
Dated	1 1		
	/ \		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00