

L18000125902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

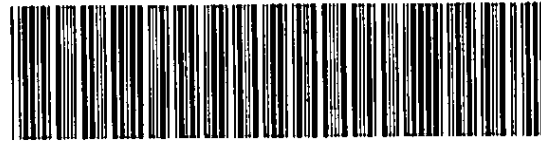
(Business Entity Name)

(Document Number)

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22 FEB 22 PM 3:19

T. MATTHEWS

MAR - 2 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Citilube Distributors Miami, 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:

Marsha Camille Lambert
Name of Person

Citilube Distributors Miami, LLC
Firm/Company

11745 SW 132 CT
Address

Miami, Florida 33186
City/State and Zip Code

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

For further information concerning this matter, please call:

Marsha Lambert at (786) 728-5167
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

22 FEB 22 PM 3:19

Citilube Distributors Miami, 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 5/18/2018 and assigned
Florida document number L18000125902.

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:

11745 SW 132 CT

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida 33186

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

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>		<u>Address</u>	<u>Type of Action</u>
<u>AMBR</u>	<u>Dwayne Audley Peters</u>	80%	<u>11745 SW 132 CT, Miami FL 33186</u>	<input checked="" type="checkbox"/> Add
			<u></u>	<input type="checkbox"/> Remove
			<u></u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Marsha Camille Lambert</u>	20%	<u>11745 SW 132 CT, Miami FL 33186</u>	<input type="checkbox"/> Add
			<u></u>	<input type="checkbox"/> Remove
			<u></u>	<input checked="" type="checkbox"/> Change
<u></u>	<u></u>		<u></u>	<input type="checkbox"/> Add
			<u></u>	<input type="checkbox"/> Remove
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<u></u>	<u></u>		<u></u>	<input type="checkbox"/> Add
			<u></u>	<input type="checkbox"/> Remove
			<u></u>	<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Mr Dwayne Audley Peters is added as an Authorized Member of Citilube Distributors Miami LLC with an 80% ownership of the company. Marsha Camille Lambert remains an Authorized Member with a 20% ownership of the company.

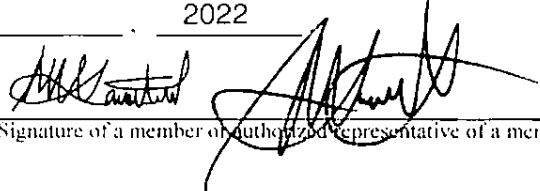
E. Effective date, if other than the date of filing: 08/22/2021 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 12, 2022


Signature of a member or authorized representative of a member

Marsha Camille Lambert

Typed or printed name of signee