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## **COVER LETTER**

FO: Registration Sec Division of Corp						
Top Fuel En	terprises LLC		:			
SUBJECT:	Name of Limit	ed Liability Company				
The enclosed Articles of /	Amendment and fee(s) are subn	nitted for filing.				
	ndence concerning this matter t					
	Marc A Boudreau					
		Name of Person				
		Firm/Company		-		
	3165 Touraine Ave			- U*	2(	
	227012	Address		TALL	2020 SEP   4 PM 4:	
	Orlando Florida 327812	City/State and Zip Code		AhASSI	<del>-</del>	
	mboudreau64@yahoo.com	·		SS 1	PΗ	·
For further information c	E-mail address: (oncerning this matter, please ca	to be used for future annual report not all:	dification)		ե։ 18	1
Marc A Boudreau		407 280-2243				
Name o	f Person	Area Code Daytir	ne Telephone Numbe	र		
Enclosed is a check for t	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Sta	itus &	
<u>Mailing Addre</u> Registration	•	Street Address: Registration S	ection			
Division of C	Corporations	Division of Co	orporations			
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite	810		
i alianassee,	1 4 5 4 5 1 1		, -			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Top Fuel Enterprises LLC			
(Name of the Limited Liability Compa) (A Florida Limited L	ny as it now appears on our record lability Company)	<u>s.</u> )	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)		202	
		AC OS	
		>	
Faton non-mailing address if analisables		) 5	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registe	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addres.	Ÿ	
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
l hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete			

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
AMBR	Marc A Boudreau	3165 Touraine Ave Orlando Florida 32812	<b>=</b> Add
			□Remove
			□Add
			□Remove
			□Change
			Add  Add  Color Semove  DChange
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fective date, if other than the date of filing:	(optio	onal)	
an effective date is listed, the date must be specific and cannot be prior to date of filing or mo ote: If the date inserted in this block does not meet the applicable statutory filing icument's effective date on the Department of State's records.	requirements, this	filing.) Pursuant date will not i	to 605,020 be listed a
solver of the on the Department of State S feedings.			
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of is filed.	n the earlier of: (b)	) The 90th da	y after the
sted September 7 2020			

Typed or printed name of signee