L21000119393

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COVER LETTER

TO:	Registration Se Division of Cor			
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SURIE	CT+ Gas Partner	s Florida LLC	· ·	
SUBJECT: Gas Partners Florida LLC Name of Limite			rd Liability Company	
The enc	losed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please r	eturn all correspo	ndence concerning this matter to	the following:	
		Description Mathematica		
		Bernardo Faincaig Meidler	Name of Person	
		Evandra US LLC		
		Evandra 05 DDC	Firm/Company	
			. ,	
		520 NW 165th Street Rd., S	nite 101	
		Jeo IVV Tostil bileet IVa., 5	Address	
		Miami, FL 33169	•	
			Cny'State and Zip Code	
		bemardofaineaig@gmail.con		
		E-mail address: (to	be used for future annual report notif	ication)
For furt	her information c	oncerning this matter, please cal	1:	
Bernar	do Faincaig Meid	ler	at (<u>786</u>) <u>953 2958</u>	
	Name o	f Person	Area Code Daytime	: Telephone Number 💆
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Enclose	d is a check for th	ne following amount:		ù
≡ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee &	\$55.00 Filing Fee &	S60.00 FilingsFee.
		Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
			(additional copy is enclosed)	(additional copy is enclosed)
				<u> </u>
	Mailing Addres	s:	Street Address:	
	Registration S		Registration Sec	etion
Division of Corporations			Division of Cor	
	P.O. Box 632		The Centre of T	allahassee
Tallahassee, FL 32314			2415 N. Monroo	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gas Partners Florida LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our r Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L21000119393</u>	ompany were filed on 03/12/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Longit	ed 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 ADDRE	FCC)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	-	,
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>er</u>	iter the name of the new registe
		;
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street aa	ldress -
	City	, Florida
New Registered Agent's Signature, if changing Registered A	Agent:	Zip Code
hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change	uplete performance of my duties ut as provided for in Chamer 60	s, and I am familiar with and

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	PRO GAS MANAGEMENT LLC	30 N Gould St., Sheridan, WY 82801	□Add
			■Remove
MGR	OCOEE PETROLEUM CORP	401 71St., Miami Beach, FL 33141	■Add
		·	□Remove
			□ Change
		<u> </u>	🗀 Add
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			Change
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ocument's effecti	ve date on the Dep	artment of State	's records.	andiory ming re	quirements, titi		-
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