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## **COVER LETTER**

Registration Section

Division of Corporations

TO:

CUDIF <i>C</i> T	EA PETRO	LEUM LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return	all correspo	ndence concerning this matter	to the following:	
		MUHAMMAD NAEEM		
			Name of Person	
		NAEEM CPA PA		
			Firm/Company	
		833 SHOTGUN ROAD, S	UITE 106	
			Address	
		SUNRISE, FL 33326		
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notification	n)
For further in	nformation c	oncerning this matter, please ca	all:	
MUHAMM	AD NAEEM	í	561 306-2915 at ()	
	Name o	f Person	Area Code Daytime Telep	phone Number
Enclosed is a	a check for th	ne following amount:		
<b>■</b> \$25.00 F	Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee.  Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	iling Addres	Section	Street Address: Registration Section Division of Cornerate	ione
	vision of C D. Box 632	orporations 7	Division of Corporat The Centre of Tallah	
Tal	llahassee, I	FL 32314	2415 N. Monroe Stre	eet, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EA DETROIFUM IIC

(Name of the Limited Liability Com (A Florida Limite		ecords.)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L21000132088</u>	any were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li-	ability 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)	<u> </u>	
		<del>-</del>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office address here:	ce address on our records, <u>e</u>	nter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	ıddress
	City	_, Florida 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 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
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			Change
		<u> </u>	
			□ Remove
		<del>.</del>	□Remove
			□Change
			□Remove
			□Change
			□Add
			Change,
			☐ Change
			 □Remove
			Change

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etive date	, if other th:	an the date	of filing				(c	ntional)	
effective date	e is listed, the d	ate must be s this block d	oecitic and o	cannot be preet the app	or to date of licable stati	filing or more	than 90 days	after filing.)	Pursuant to 605.02 vill not be listed
									3
ord specific tiled,	s a delayed e	ffective date	e, but not a	an effective	time, at 12	:01 a.m. on	the earlier o	t: (b) The	90th day after th
									•
d	)21 —————								
				a	went				
		Sign	sture of a m	ember or au	thorized rep	escutative of	a member		

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGRM HANI BASKARON 17455 ROSELLA RD

BOCA RATON, FL. 33496

Title: AMBR ADWARD BASKARON 17455 ROSELLA RD BOCA RATON, FL. 33496

Title: AMBR ANGELINA J BASKARON 17455 ROSELLA RD BOCA RATON, FL. 33496 L21000132088 FILED 8:00 AM March 22, 2021 Sec. Of State tscott

Name Correction should be EDWARD BASKARON

Article V

The effective date for this Limited Liability Company shall be:

03/20/2021

Signature of member or an authorized representative

Electronic Signature: MUHAMMAD NAEEM

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.