## 121000333430

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DATE:

7/23/2021

NAME: ULTRAMAR MERCHANTS LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

Hedr

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ULTRAMAR MERCHANTS LLC  |   |                                      |
|---|---|--------------------------------------|
| (Name of the Limited Liab)<br>(A Flori  | llity Company as it now appears on our<br>da Limited Liability Company) | r records.)                          |
| The Articles of Organization for this Limited Liability Florida document number L21000333430              | Company were filed on <u>07/22/202</u>                                  | and assigned                         |
| 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 "Lin   | mited Liability Company," the designation                               | n "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |   | <del> </del>                         |
| (Principal office address MUST BE A STREET ADD  | RESS)   |                                      |
|   | <del></del>   | <i>S</i> N                           |
|   |   | 921<br>ECR<br>TAL                    |
| Enter new mailing address, if applicable:   |   |                                      |
| (Mailing address MAY BE A POST OFFICE BOX)  |   | 2 N Pm                               |
| -   |   |                                      |
|   |   | ∞ D                                  |
| B. If amending the registered agent and/or registere agent and/or the new registered office address here: | ed office address on our records,                                       | enter the name of the new register   |
| Name of New Registered Agent:   |   |                                      |
| New Registered Office Address:  | ·   |                                      |
|   | Enter Florida street  | address                              |
|   |   | , Florida                            |
|   | Ciņ∙  | 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              | Type of Action |
|--------------|--------------------|----------------------|----------------|
| MGR          | RAFAEL L. MARTINEZ | 7023 SW 152ND COURT  |                |
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|              |                    | MIAMI, FLORIDA 33193 | 🗀 Remove       |
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| E. Effective dat     | e, if other than t                                | he date of fi                    | ling:            |                 |                    | for a second   |               |                                       |               |
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| Dated JULY 2         | 2   |                                  | 2021             |                 |                    |                |               |                                       |               |
|                      | e 0 1   | <u> </u>                         | _'               | <del></del> ·   |                    |                |               |                                       |               |
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