Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : US CONTADOR INC Account Number : I20200000121 Phone : (770) 926-2700 : (888)772-8108 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PETROLMEX INTERNATIONAL LLC

Certificate of Status 0 Certified Copy 04 Page Count \$25.00 Estimated Charge

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Electronic Filing Menu Corporate Filing Menu

Help

12/23/2021 1:47 F

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PETROLMEX INTERNATIONAL			
(Name of the Limite	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	DEC 2	
The Articles of Organization for this Limited Li	ability Company were tiled on 10/01/2021	and assigned	
Florida document number 1.21000431823	·	and assigned assi	
This amendment is submitted to amend the follo	owing:	<u>'</u>	
A. If amending name, enter the new name of	the limited liability company here:		
The new name most be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applie	able:		
(Principal office address MUST BE A STREE	TADDRESS)		
			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE R. If amonding the registered agent and/or re-	registered office address on our records, enter the na	me of the new registered	
agent and/or the new registered office addres			
Name of New Registered Agent:			
New Registered Office Address:		- 	
	Enter Florida street address		
	, Florida,	Zip Code	
	·	sq. con	
provisions of all statutes relative to the propaccent the obligations of my position as regi	ed agent and agree to act in this capacity. I further over and complete performance of my duties, and I are istered agent as provided for in Chapter 605, F.S. Gregistered office address, I hereby confirm that the	n familiar with and Ir, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

2021-12-23 18:48:47 GMT

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From: Mike Nat

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 QUIARO ROJAS, MARILEN	919 HILLCREST DR, APT 611	□Add	
		HOLLYWOOD, Ft. 33021	\bullet Remove
			□Change
			□Add
			□Remove
			Change
			🗆 Add
			Remove
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			Remove
			□Change
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			Change
			□Add
			□Remove
			□ Change

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fective date, if other than the date of filing:	(optional)
in effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable state	thing or more than 90 days after filing.) Pursuant to 605.0 utory filing requirements, this date will not be listed
ocument's effective date on the Department of State's records.	•
ecord specifies a delayed effective date, but not an effective time, at 13 is filed.	2:01 a.m. on the earlier of: (h). The 90th day after
DECEMBER 21ST 2021	, , ,
ated DECEMBER 21ST 2021	Jun-
Signature of a member or authorized rep	presentative of a member