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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS BUSINESS & TAX SERVICES INC

Account Number : 120220000138 : (786)239-9353 Fax Number : (305)675-8465

\*\*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 ANDREWS PETRO LLC

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## **COVER LETTER**

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	Registration S Division of Co			
enbir.		S PETRO LLC		
SUBJEC	. I :	Name of Lin	rited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please rei	turn all correspo	ondence concerning this matter	to the following:	
		SHAHNAWAZ KHAN		
			Name of Person	**
		ANDREWS PETRO LLC		
			Firm:Company	-
		2333 S ANDREWS AVE		
		· · · · · · · · · · · · · · · · · · ·	Address	_
		FORT LAUDERDALE, F	L 33316	
			City/State and Zip Code	-
		AIMET@ EXPRESSTAXS		
		L-mail address: (	to be used for future annual report notification)	
For furthe	er information c	concerning this matter, please c	atl:	
SHAHNA	AWAZ KHAN		786 599-9915	
	Name o	of Person	Area Code Daytime Felephone Number	r
Unclosed	is a check for t	he following amount:		
<b>■ \$25.</b> 0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	radditional copy is enclosed) Certified	ne of Status &
	MailingAddres Registration 5		StreetAddress: Registration Section	
	Sivision of C		Division of Corporations	
J	<sup>9</sup> .O. Box 632	.7	The Centre of Tallahassee	
_	Fallahassee, l	FI, 32314	2415 N. Monroe Street, Suite 8	(10

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C	omnany as it now appears on our records.	<u> </u>
(A Florida Lii	Ominany as it now appears on our records, mited Ludvillay Company)	•
The Articles of Organization for this Limited Liability Com Florida document number 1,23000356753	npany were filed on 07/28/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	I liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	or the abbreviation P.L.C."
Enter new principal offices address, if applicable:		-
Principal office address MUST BE A STREET ADDRES	SS)	
		3
Enter new mailing address, if applicable:		5.
Mailing address MAY BE A POST OFFICE BOX)		6 1
<ol> <li>If amending the registered agent and/or registered of agent and/or the new registered office address here:</li> </ol>	ffice address on our records, <u>enter th</u>	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Lister Florida street address	
	Flori	ida
	Gæ	Zip Code

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:

2023-10-02 19.42:57 GMT

MGR = Manager AMBR = Authorized Member

Τo.

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	KHAN, SHAHNAWAZ	2333 S ANDREWS AVE	□Add
		FORT LAUDERDALE, FL 33316	_
		-	JChange
<del></del>			
			Remove
			□Change
<del></del>			JAdd
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	Shahnawa	z Khan		
Dated OCTOBER 02	2023			
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Note: If the date inserted in this b document's effective date on the E	lock does not meet the appl	cable statutory filing requi	90 days after filing.) Pursuant to 605 rements, this date will not be list	5,0207 .ed as
Effective date, if other than the fan effective date is listed, the date mu	date of filing:		(optional)	
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Typed or printed name of signee