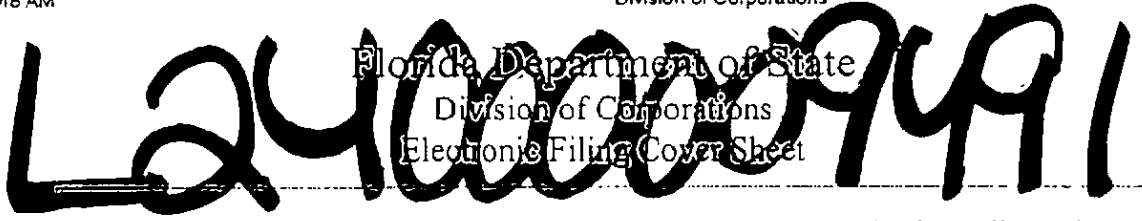


9/25/25, 11:48 AM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : PRIME INCOME TAX AND ACCOUNTING LLC  
Account Number : I20210000201  
Phone : (561)409-3106  
Fax Number : (561)952-0315

2025 SEP 25 PM 3:40

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

Email Address: PRIMEINCOMETAX1@GMAIL.COM

RECEIVED

2025 SEP 25 PM 12:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

JJ PETROLEUM USA LLC

Certificate of Status	0
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T. LEMIEUX

Electronic Filing Menu

Corporate Filing Menu

SEP 26 2025

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JJ PETROLEUM USA LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAFAELA NUNES VIEIRA

\_\_\_\_\_  
Name of Person

PRIME INCOME TAX AND ACCOUNTING LLC

\_\_\_\_\_  
Firm/Company

23269 STATE ROAD 7, SUITE 119

\_\_\_\_\_  
Address

BOCA RATON, FL 33428

\_\_\_\_\_  
City/State and Zip Code

PRIMEINCOMETAXI@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAFAELA NUNES VIEIRA

561

409-3106

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJ PETROLEUM USA LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/03/2024 and assigned  
Florida document number L24000009491.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

*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 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>	<u>Address</u>	<u>Type of Action</u>
MMBR	JONATAN MACHADO PONCE	6054 AMBERLY CT	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MARANATA ISRAEL G. PINTO	10573 BILLINGS ST	<input checked="" type="checkbox"/> Add
		ORLANDO, FL. 33832	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

PLEASE CHANGE TITLE OF THE MEMBER JONANTAN MACHADO PONCE TO MMBR (MANAGING MEMBER) AND ADD MARANATA ISRAEL GONZALEZ PINTO TITLE AMBR(AUTHORIZED MEMBER)

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER. 23rd 2025



\_\_\_\_\_  
Signature of a member or authorized representative of a member

JONANTAN MACHADO PONCE

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

Doc ID: cf59f7f15f4574de0605cb44d808bd614d87b72c