# L2400053904

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer  J. HORNE
MAY - 6 2024
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200429192982

FILED 2024 HAY -3 PH 12: 19

MANAY-3 PH 2:27

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Spring Hill Fuel LLC	
Please Debit FCA000000003 For: 25	
Thank you Seth Neeley	
Step/	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ /	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC    Retrieval
Walk-In Will Pick Up	Courier

## **COVER LETTER**

то:	Registration Se Division of Con					
SUBJE	~	l Fuel LLC				
SUBJE	C1:	Name of Lim	ited Liability Company			
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Anwar Khoja				
			Name of Person			
		Spring Hill Fuel LLC				
			Firm/Company			
		5244 Mariner Blvd.				
		····	Address			
		Spring Hill, FL 34609				
			City/State and Zip Code			
		akraval@gmail.com				
For Cont	!		to be used for future annual report n	ouncation)		
		oncerning this matter, please c	aii:			
Anwar I			727 423-5219 at ()			
	Name o	f Person	Area Code Dayt	ime Telephone Number		
Enclosed	d is a check for the	ne 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 S	Section	Street Address: Registration S			
Division of Corporations			Division of Corporations			

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 MAY -3 PM 12: 23

Spring Hill Fuel 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 L	iability Compa	ny were filed on $\frac{01/30}{1}$	0/2024	and assigned
Florida document number L24000053904	·			
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name o	of the limited li	ability company her	<u>e</u> :	
N/A				
The new name must be distinguishable and contain the	words "Limited Li	ability Company," the des	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	N/A		
(Principal office address MUST BE A STREE	<u>ET ADDRESS)</u>			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
	_			
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:		e address on our rec	ords, <u>enter the na</u>	me of the new registered
New Registered Office Address:		17 171 1	a street address	
		Enter Pioria	a street address	
		City	, Florida _	Zip Code
New Registered Agent's Signature, if changing l	Degistered Ages	- 2		z.ip Code
		<del></del>		
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as registery being filed to merely reflect a change in the company has been notified in writing of this	er and comple istered agent a registered offi	te performance of m s provided for in Ch	y duties, and I an apter 605, F.S. O	n familiar with and Or, if this document is
	īrci	nunging Registered Agen	t, Signature of New I	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>	Name	Address	Type of Action
MGR	Khoja, Anwar	5244 Mariner Blvd.	
		Spring Hill, FL 34609	≅Remove
			Change
MGR	Azim, Anm Enayetul	5244 Mariner Blvd.	<b>=</b> Add
		Spring Hill, FL 34609	□Remove
			□Change
			OAdd
			□Remove
			☐ Change
			DAdd
		<del></del>	□Remove
		· · · · · · · · · · · · · · · · · · ·	□Add
		<del>u</del> -	□Remove
			☐ Change
			□∧dd
			□Remove
			Change

Effective date, if other than the date of filing:  ((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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The records specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the parties of:  (b) The 90th day after the rad is filed.  Dated  May 2  2024  (ignal) re of a member or authorized representative of a member  George G. Pappas	1 -	N/A 					
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  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 ord is filed.  Dated  May 2  1024  1034  1036  104  1057  1058  1069  1070  1080							
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	Dated_	May 2		2024	<u></u> .		
			- Constant				
			PISDAIRIE OF	a member or noth	arized febrecentoliu	e of a member	

Filing Fee: \$25.00

#### **COVER LETTER**

TO: Registration S Division of Co			
	ll Fuel LLC		
Soborer.	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
	Anwar Khoja		
	<del></del>	Name of Person	<del></del>
	Spring Hill Fuel LLC		
	<del></del>	Firm/Company	<del></del>
	5244 Mariner Blvd.		
		Address	<del></del>
	Spring Hill, FL 34609		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	akraval@gmail.com	to be used for future annual report notification	
Par forther informitation			on)
For further information of	concerning this matter, please ca	ali;	
Anwar Khoja		727 423-5219 at ()	
Name o	of Person	Area Code Daytime Tele	ephone Number
Enclosed is a check for t	he 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 Addre		Street Address: Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303