## 624000189732

(Requestor's Name)	
(Address)	80043114
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	06/11/2401033
(Document Number)	
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## **COVER LETTER**

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TO:

TO: Registration S Division of Co				
	Diesel Tech, LLC			
SUBJECT:	Name of Lin	ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
	Edgar Roman			
	· <del>- · · · · · · · · · · · · · · · · · ·</del>	Name of Person		
	The One Diesel Tech, LLC	3		
		Firm/Company		
	16720 SW 277TH ST		<b>5</b> :	高 (2)
		Address		· .
	Homestead, FL 33031			
	edgarroman0115@gmail.co		OF ST	PH :: 54
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report noti all:	fication)	5 <sup>4</sup>
Edgar Roman		786 886-7411 at ( )		
Name	of Person		e 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 Certificate of Certified Cop (additional copy	f Status & Dy
Mailing Addr Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Second Division of Coron The Centre of Tallahassee, FL	rporations Callahassee e Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The One Diesel Tech, LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appears o Liability Company)	on our records.)		
he Articles of Organization for this Limited I lorida document number <u>L24000189732</u>	Liability Company	were filed on 4/22/	24	and assig	ned
his amendment is submitted to amend the fol	lowing:				
. If amending name, enter the new name	of the limited liab	oility company here	<b>:</b>		
One Diesel Tech, LLC					
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or	the abbreviation "L.L.	C."
nter new principal offices address, if appli	cable:	N/A			
Principal office address MUST BE A STRE.	ET ADDRESS)	N/A			
		N/A			
				F	
nter new mailing address, if applicable:		N/A		至二十	
(Mailing address MAY BE A POST OFFICE BOX)		N/A		ASS	٠,
		N/A		EE.S	<u> </u>
				: 5 TAT FL	
<ol> <li>If amending the registered agent and/or gent and/or the new registered office addre</li> </ol>		address on our reco	ords, <u>enter the</u>	name of the new	regist
ent and/or the new registered office address	is itele.				
Name of New Registered Agent:	N/A			<del></del> -	
New Registered Office Address:	N/A				
<del></del>		Enter Florida	ı street address		
	N/A		, Florid	a N/A	
		City		Zin 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 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
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ective date, if other than the date of effective date is listed, the date must be spe	of filing:	ior to date of filin	g or more than 90 c	_ (optional) lavs after filing.	) Pursuai	nt to 605,020
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