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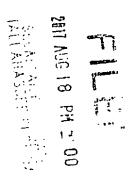
(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
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(Document Number)						
Certified Copies Certificates of Status						
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J. HARRIS

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	Guzman Energy Investments LLC						
0020	Name of Limited Liability Company						
Dear S	Sir or Madam:						
The en	nclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:							
Alexis	G. Miller						
	Name of Person		_				
Guzm	an & Company						
	Firm/Company	-	_				
101 A	101 Aragon Avenue, 2nd floor						
	Address						
Coral	Gables, FL 33134						
	City/State and Zip Code						
	er@guzman.com						
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Tere A	Angel	305 at (416-5301)				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:							
	☑ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy				
INHSI	8 (2/14)						

• STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	Jame of the limited liability company: Guzman Energy	y Investm	ents LLC				
2 (a)	101 Aragon Avenue	(b)	101 Ara	agon Avenue			
2. (Principal office address of limited liability company:	(0)		Mailing address of limited liability company:			
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)			
	2nd floor		2nd floor				
	Coral Gables, FL 33134		Coral Ga	bles, FL 33134			
	11/13/2015		L1500019	91380			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Corporation Service Company Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
	Megisteral Office Addiction (Insect Do. 10 Annual Street, Application)						
	1201 Hays Street		<u>. </u>	_			
	Tallahassee , FL	32301		2811 AUG 18			
	NEW Registered Office Address:	<u> </u>	 	PH W 00			
				.			
101 Aragon Avenue, 2nd floor							
	Coral Gables , FL	33134					
the chagent was/v the ar Sign I heroprovise the obto means	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the authorized representative of a member of authorized representative of a member and agreement of all statutes relative to the proper and complete oligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	the regist ability cor of the limited	ered office npany, it is ted liability ability com is G. Miller	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany. Printed or typed name of signee			
Signat	ure of Registered Agent	Alexis (3. Miller	DATE: 8/17/2017			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00