| Current Mai | ling Address: | | | |
|--|--|------------------------------------|---|------------------------------|
| | E DE LEON BLVD., SUITE 101 BLES, FL 33134 | | | |
| FEI Number: 26-3162842 | | | Certificate of Status Desired: No | |
| Name and A | Address of Current Registered Agent: | | | |
| URBANO, MAY 12010 MICHAE JACKSONVILL | | | | |
| | | | | |
| The above name | d entity submits this statement for the purpose of changi | ng its registered office or regis | tered agent, or both, in the State of Flo | orida. |
| | d entity submits this statement for the purpose of changi E: MAYRA URBANO | ing its registered office or regis | tered agent, or both, in the State of Flo | |
| | - | ng its registered office or regis | tered agent, or both, in the State of Flo | orida. 03/29/2017 Date |
| SIGNATURE | E: MAYRA URBANO | ng its registered office or regis | tered agent, or both, in the State of Flo | 03/29/2017 |
| SIGNATURE | E: MAYRA URBANO Electronic Signature of Registered Agent | ing its registered office or regis | tered agent, or both, in the State of Flo | 03/29/2017 |
| SIGNATURE | E: MAYRA URBANO Electronic Signature of Registered Agent Person(s) Detail : | | | 03/29/2017 |
| SIGNATURE Authorized Title | E: MAYRA URBANO Electronic Signature of Registered Agent Person(s) Detail : MGR | Title | MGR | 03/29/2017 |

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000070799

Entity Name: NOPETRO LLC

CORAL GABLES, FL 33134

Current Principal Place of Business: 2625 PONCE DE LEON BLVD., SUITE 101

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JONATHAN LOCKE

Electronic Signature of Signing Authorized Person(s) Detail

MGR

03/29/2017 Date

FILED Mar 29, 2017 **Secretary of State** CC3950838741

| Title | MGR | Title | MGR |
|-----------------|---------------------------------------|-----------------|---------------------------------------|
| Name | HERRERA, JORGE A | Name | LOCKE, JONATHAN E |
| Address | 2625 PONCE DE LEON BLVD. SUITE 101 | Address | 2625 PONCE DE LEON BLVD. SUITE 101 |
| City-State-Zip: | CORAL GABLES FL 33134 | City-State-Zip: | CORAL GABLES FL 33134 |