818841

| (R | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (A | ddress) | | | |
| (A | ddress) | | | |
| (C | ity/State/Zip/Phon | e #) | | |
| PICK-UP | | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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07 APR 18 PM 2: 00 SECRETARY OF STATE FALLAHASSEE, FLORIDA

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R.A. Charge

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| ON SERVICE COMPANY. | | | | |
|--|--|--|--|--|
| ACCOUNT NO. : 07210000032 | | | | |
| REFERENCE : 851848 4323297 | | | | |
| AUTHORIZATION: Spelle Man | | | | |
| COST LIMIT : \$ 35.00 | | | | |
| ORDER DATE: April 15, 2007 | | | | |
| ORDER TIME : 10:37 AM | | | | |
| ORDER NO. : 851848-255 | | | | |
| CUSTOMER NO: 4323297 | | | | |
| | | | | |
| CHANGE OF AGENT | | | | |
| NAME: THE LOUISIANA LAND AND EXPLORATION COMPANY | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY | | | | |
| CONTACT PERSON: Susie Knight | | | | |

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of ch | ange is submitted for a corporation o | 7.0502, 607.1508, or 617.1508, Florida Statute organized under the laws of the State of Maryl registered agent, or both, in the State of Florida | land |
|---|--|---|---------------------------------|
| 1. The name of | the corporation: THE LOUSIANA L | AND AND EXPLORATION COMPANY | |
| | l office address: y Ashford, Houston, TX 77079 | | |
| 3. The mailing | address (if different): | | |
| 4. Date of incor | rporation/qualification: 06/13/1965 | Document number: 818841 | |
| | d street address of the current registe artment of State: | ered agent and registered office on file with the | |
| | C T Corporation System | | |
| | 1200 South Pine Island Road | - | |
| | Plantation, FL 33324 | | O: |
| 6. The name an (if changed): | | d agent (if changed) and /or registered office | 7 APR 18 ECRETARY LAHASSE |
| | Corporation Service Company | | me - r |
| | 1201 Hays Street | | 1 2: SI |
| | (P.O. Box NOT acco | epiable) | 2: 00 STATE _ORID; |
| | Tallahassee, FL 32301 | | • |
| The street addr as changed wil | ress of its registered office and the s l be identical. | street address of the business office of its regis | stered agent, |
| Such change w authorized by t | as authorized by resolution duly ad the board, or the corporation has be | lopted by its board of directors or by an office en notified in writing of the change. | er so |
| Par d (Signat | a d Pennengto | Brenda H. Pennington, Assista | ant Secretary |
| I further agrée of my duties, ar document is be corporation ha | to comply with the provisions of al nd I am familiar with and accept th ing filed merely to reflect a change is been notified in writing of this ch | ent and agree to act in this capacity. I statutes relative to the proper and complete e obligation of my position as registered ager in the registered office address, I hereby con ange. | nt Or if this |
| By: | n Service Company | 4/17/00 | |
| (Si | ignature of Registered Agent) | (Date) | |
| If signing on be | ehalf of an entity: | | |
| Elizabeth A. Da | wson, Asst. Vice President | | |
| (| Typed or Printed Name) | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *