858093

(Requestor's Name)		
(Address)		
(Address)		
(C)	n/State/Zin/Dhane	. 40
(CII	ry/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
		
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SECRETARY OF STATE TALL AHASSEE, FLORIDA

13 NOV 20 PM 1: 00

APPROVED AND FILED

C. LEWIS
NOV 2 5 2013
EXAMINER



CT Corporation

111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctcorporation.com

November 12, 2013

RE: CALLON PETROLEUM OPERATING COMPANY. (DE.DOM)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is $\underline{1}$ check in the amount of \$ 87.50 to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours.

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure November 12, 2013

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C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections	607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
-	(Name of Registered Agent)	
hereby resigns as Registered Agent for	CALLON PETROLEUM OPERATING COMPANY	
nereby resigns as Registered Agent 10	(Name of Corporation)	
858093		
(Document Number, if known)	Western State of the State of t	
A copy of this resignation was mailed	to the above listed corporation at its last known address.	
this statement is filed.	Be discontinued on the 31st day after the date on which	
(8	Signature of Resigning Agent)	
If signing on behalf of an entity:		
C T CORPORA	ATION SYSTEM - THERESA ALFIERI	
	(Typed or Printed Name)	
A	SSISTANT SECRETARY	
	(Capacity)	

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314