## F02000006290

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DIVISION OF CONTRACTION

CIA chos Mm 9/18/03 FILED



ACCOUNT NO. : 072100000032

REFERENCE : 235887

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: September 9, 2003

ORDER TIME: 9:45 AM

ORDER NO. : 235887-565

CUSTOMER NO: 7366481

CUSTOMER: Ms Brenda Pennington

Conocophillips

600 North Dairy Ashford

Houston, TX 77079

## CHANGE OF AGENT

NAME: CONOCOPHILLIPS SERVICES INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi

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

Pursuant to th	he provisions of sections 607.050	92, 617.0502, 607.1508, or 617.1508, F	Florida Statutes,
$this\ statement$	of change is submitted for a corpo	oration organized under the laws of the	State of
Delaware	in order to change its reg	gistered office or registered agent, or b	oth, in the State
of Florida.			
1. The name o	f the corporation: CONOCOPHILLIPS	SERVICES INC.	
2. The principa	al office address:		
600 North	Dairy Ashford, Houston, TX 7	7079-1175	
3. The mailing	address (if different):		
600 N. Da	iry Ashford, ML 3170, Houston	, TX 77079	
4. Date of inco	orporation/qualification: 12/18/	Document number: F020	00006290
	nd street address of the current reg artment of State:	gistered agent and registered office on fil	e with the
	C T Corporation System		E4 3
	1200 South Pine Island Road		EAR PASS
	Plantation, FL 33324	·	
6. The name a changed):	and street address of the new reg	gistered agent (if changed) and /or regi	stered office (I
	Corporation Service Company		
	1201 Hays Street (P.O. Box or person	nal mailbox NOT acceptable)	- -
	Tallahassee, FL 32301	· · · · · · · · · · · · · · · · · · ·	_
The street add agent, as chan	ress of its registered office and th	ne street address of the business office of	of its registered
Such change vauthorized by		adopted by its board of directors or by been notified in writing of the change.	
MUU	er, chairman or vice chairman of the board)	Maureen Cullen, Attorney in Formatte (Printed or typed name and title)	act
I further agree performance o registered age	e to comply with the provisions of of my duties, and I am familiar wi nt. Or, if this document is being	agent and agree to act in this capacity.  If all statutes relative to the proper and it and accept the obligation of my post filed merely to reflect a change in the ration has been notified in writing of the	ition as registered
- Elyuta	(Signature of Registered Agent)	09/11/2003 (Date)	<u> </u>
If signing on beh		,	
Elizabeth A	-	Asst. Vice President	
	(Typed or Printed Name)	(Capacity)	

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