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To:

Division of Corporations

Fax Number

: (850)617-6380

Prom:

Account Name : CORPORATE CREATIONS INTERNATIONAL IN

Account Number : 110432003053

Fax Number

: (561)694-8107 : (561)694-1639

\*\*Enter the email address for this business entity to be used for futual annual report mailings. Enter only one email address please. \*\*

Email Address:

## REGISTERED AGENT CHANGE CNE GAS HOLDINGS, INC.

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

Purseant to the provisions of sections 607.0502.617.0502.607.1508, or 617.1508. Florida Statutes, this sament of change is submitted for a corporation organized under the laws of the State of Kentucky in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the comporation; CNE GAS HOLDINGS, INC.	
2. The principal office address: 9960 CORPORATE CAMPUS DR.	
LOUISVILLE KY 04223	_
3. The mailing address (if different); 100 CONSTELLATION WAY SUITE 1700P  BALTIMORE MD 21202	_
4. Date of incorporation/qualification: 10/23/2007 Document number: F07000005265	_
5. The many and classes address of the comment registered growt and project and efficiency file with the	
Florida Department of State: (If resigned, enter resigned)  CTCORPORATION SYSTEM	
1200 SOUTH PINE ISLAND BOAD	
PLANTATION FL 33324 US	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Corporate Creations Network Inc.	
11380 Prosperity Farms Road #221E	
Pol Box NOT acceptable Palm Beach Gardens, FL 33410	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such charge was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Kristine Roy, as Attorney-in-Fact	
I hereby accept the appointment as tegistered agent and agree to act in this capacity.  Vourther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties since I am familiar with and accept the obligation of my position as registered agent. Of, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
10/01/2012	
If signing on behalf of an entity:	
Kristine Roy, Special Secretary  Typed or Printed Name	
* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)