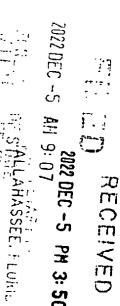
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(Req	uestor's Name)			
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A. BUTLER DEC - 6 2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500
ACCOUNT NO. : I2000000195
REFERENCE : 178821 8398521
AUTHORIZATION: Synello Ble man
COST LIMIT : \$ 35.00
ORDER DATE : December 5, 2022
ORDER TIME : 1:36 PM
ORDER NO. : 178821-002
CUSTOMER NO: 8398521
CHANGE OF AGENT
NAME: ROGERS PETROLEUM, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
The state of the s

EXAMINER'S INITIALS:

CONTACT PERSON: Eyliena Baker

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida S n organized under the laws of the State of _ r registered agent, or both, in the State of Fl	TN	his 	_
·	he corporation: ROGERS PETRO		и иш.		
	· · · · · · · · · · · · · · · · · · ·	NORTH STREET MORRISTOWN, TN 378	814		<u> </u>
3. The mailing a	ddress (if different): PO BOX 17	14 MORRISTOWN, TN 37814			
4. Date of incorp	poration/qualification: 01/26/201	Document number: F160000	00380		
5. The name and		stered agent and registered office on file wit			
	URS AGENTS, LLC				
	3458 Lakeshore Drive			20	
	Tallahassee, FL 32312		罗瓦	2022 DEC	ور عبط ال
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or registered offi	ice,	5	e
	Corporation Service Company		1100	AH 9: 0	gypotene a la la seneral
	1201 Hays Street			: 07	
	P.O Box NOT acceptable				
	Tallahassee	FL 32301			
The street addre	ss of its registered office and the be identical.	e street address of the business office of its	register	red ago	ent,
Such change wa authorized by th		adopted by its board of directors or by an open notified in writing of the change.	officer so	Э	
Xiel & Gome		Jill Cilmi, Vice President			
Signatur	e of an officer or director	Printed or typed name and titl	e		_
I further agree t of my duties, and document is bein corporation has	o comply with the provisions of d Lam familiar with and accept.	gent and agree to act in this capacity, all statutes relative to the proper and com, the obligation of my position as registered ge in the registered office address. I hereb change.	plete per l'agent. v confiri	forme Or, if n that	ince this the
By: Inc	ree Cokubi.	12/05/2022			
Sigr	nature of Registered Agent	Date			_
If signing on bel	nalf of an entity:				
Grace E. Kirby, A	Asst. Vice President				
Ty	ped or Printed Name	-			

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