

102 0000 25355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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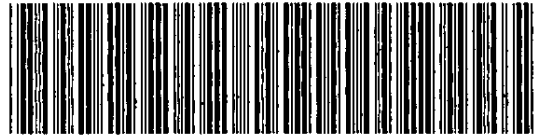
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE  
JUN 24 2008  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OMEGA GAS & OIL, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WALID ALSHEIKH  
(Name of Person)

OMEGA GAS & OIL, LLC  
(Firm/Company)

1974 S. CONGRESS AVE  
(Address)

WEST PALM BEACH, FL 33406  
(City/State and Zip Code)

FILED  
2009 JUN 23 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

WALID ALSHEIKH at ( 561 ) 542 1103  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: OMEGA GAS & OIL, LLC

2. (a) Principal office address of limited liability company: 1974 S. CONGRESS AVE  
(Note: **MUST BE STREET ADDRESS**) WEST PALM BEACH, FL 33406

(b) Mailing address of limited liability company: 1974 S. CONGRESS AVE  
(Note: **MAY BE POST OFFICE BOX**) WEST PALM BEACH, FL 33406

9/26/2002  
3. Date of filing/registration in Florida

L02000025355  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: WALID ALSHEIKH

Registered Office Address: 10242 CANOE BROOK CIR  
BOCA RATON, FL 33498

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent**: \_\_\_\_\_

**NEW Registered Office Address**: 1974 S. CONGRESS AVE  
(**MUST BE FLORIDA STREET ADDRESS**) WEST PALM BEACH, FL 33406  
\_\_\_\_\_, FL \_\_\_\_\_

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Walid Alsheikh  
(Signature of a member or authorized representative of a member)

WALID ALSHEIKH  
(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Walid Alsheikh  
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**  
**FILING FEE: \$25.00**