

L04000089824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

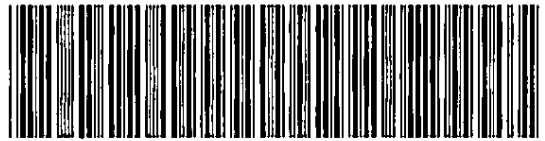
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 JUN 30 PM 2:48
CLERK OF SUPERIOR COURT
JULIA A. S. ELLIOTT

WILLIAMS MULLEN

Direct Dial: 757.473.5436
wchappell@williamsmullen.com

June 29, 2021

File No. 042365.0004

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Statement of Change of Registered Office/Agent for Limited Liability Company
National Oil & Gas Distributors of Florida, LLC
FL SOS ID# L04000089824

Dear Sir or Madam:

Please file the enclosed Statement of Change of Registered Office/Agent for the above referenced entity. I enclose our firm's check in the amount of \$25.00 for the filing fee.

Please return the acknowledgement of filing to my attention at the address below as soon as possible.

Should you have questions regarding this matter, please contact me directly at (757) 473-5436 or email me at wchappell@williamsmullen.com. Thank you for your assistance with this matter.

Sincerely,



Wendy M. Chappell
Corporate Paralegal

Enclosures

45581333_1

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: National Oil & Gas Distributors of Florida, 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:

Wendy M. Chappell, Paralegal

Name of Person

c/o Williams Mullen Clark & Dobbins, P.C.

Firm/Company

222 Central Park Avenue, Suite #1700

Address

Virginia Beach, VA 23462

City/State and Zip Code

wchappell@williamsmullen.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wendy M. Chappell, Paralegal

at (757) 473-5436

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 605.0114 or 605.0116, 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: National Oil & Gas Distributors of Florida, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1000 E. City Hall Avenue

Norfolk, VA 23504

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1000 E. City Hall Avenue

Norfolk, VA 23504

12/13/2004

L04000089824

3. Date of filing/registration in Florida

4. Document number

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

HAILE, SHAW & PFAFFENBERGER, P.A.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

660 US HIGHWAY ONE, 3RD FLOOR

NORTH PALM BEACH, FL 33408

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

Alan C. Espy, Esq.

NEW Registered Office Address:

3300 PGA Boulevard, Suite 630

Palm Beach Gardens, FL 33410

2021 JUN 30 PM 2:48
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TALLAHASSEE, FLORIDA

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.

Signature of a member or authorized representative of a member

Jeffrey G. Miller, Manager

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 605, 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.

Signature of Registered Agent

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