

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000027719

FILED
Oct 16, 2006
Secretary of State

Entity Name: LANTANA PETROLEUM LLC

Current Principal Place of Business:

10300 W. COMMERCIAL BLVD.
SUNRISE, FL 33351

New Principal Place of Business:

6760 LANTANA ROAD
LAKE WORTH, FL 33467

Current Mailing Address:

10300 W. COMMERCIAL BLVD.
SUNRISE, FL 33351

New Mailing Address:

6760 LANTANA ROAD
LAKE WORTH, FL 33467

FEI Number: 20-2696123 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FOREST HILLS PETROLEUM LLC
10300 W. COMMERCIAL BLVD.
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

FOREST HILLS PETROLEUM LLC
6760 LANTANA ROAD
LAKE WORTH, FL 33467 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THEODORA MAXAKOULIS

10/16/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FOREST HILLS PETROLE, UM LLC
Address: 10300 W. COMMERCIAL BLVD.
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FOREST HILLS PETROLE, UM LLC
Address: 6760 LANTANA ROAD
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THEODORA MAXAKOULIS

MGRM

10/16/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date