LD5000044090

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: SOUTHEAST PETROLEUM ENTERPRISES LLC (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
KLEOPAS KLEOPA "CLIFF (Name of Person)		
SOUTHEAST PETROLEUM ENT	EPRISES LLC	
801 YAMATO RD (Address)		
BOCA RATON FIA 3343. (City/State and Zip Code)	<u>/</u>	
For further information concerning this matter, please call:		
KLEOPAS KLEOPA 'CLIFF' at (56 (Name of Person)	(Area Code & Daytime Telephone Number)	
Registration Section R Division of Corporations E Clifton Building P	AAILING ADDRESS: Legistration Section . Division of Corporations LO. Box 6327 Callahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	



August 30, 2006

KLEOPAS KLEOPA 801 YAMATO ROAD BOCA RATON, FL 33431

SUBJECT: SOUTHEAST PETROLEUM ENTERPRISES LLC

Ref. Number: L05000044090

We have received your document for SOUTHEAST PETROLEUM ENTERPRISES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Letter Number: 106A00053172

Leslie Sellers Document Specialist

.. 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. The name of the limited liability company is: SOUTHEAST PETFOLEUM	ENT. LLC
2. The mailing address of the limited liability company is: 801 YAMATO R	
BOCA RATON FIA 33431	·
MAY 4 / 2005 3. Date of filing/registration in Florida Losonoo 44 of the filing/registration in Florida Losonoo 44 of the filing/registration in Florida	090
3. Date of filing/registration in Florida 4. Document number	
5. The name of the registered agent and the registered office address as shown on the rec Florida Department of State:	
CT CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND RD - TEAT	41
CT CORPORATION SYSTEM Name 1200 SOUTH PINE ISLAND RD - TEAT Address PLANTATION, FIA 33324 TEL 954- City, State and Zip	- 473-5503
6. The name and address of the new registered agent and/or office:	
KLEOPAS KLEOPA "CLIFF" 801 YAMATO RD	
Name	: 22220
Florida street address (P.O. Box NOT acceptable)	•
•	•
BOCA RATON FL 33431 City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it confirmed that after the change or changes are made, the Florida street address of the regard the business office of the registered agent will be identical. Or, in the case of a Flor liability company, it is hereby confirmed that the change(s) was/were authorized by an a of the members of the limited liability company or as otherwise provided in the articles or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)	gistered office ida limited Iffirmative vote
KLEO PAS KLEOPA (Printed or typed name of signee)	,
I hereby accept the appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statules relative to the proper and complete performan and I am familiar with and accept the obligations of my position as registered agent as performent in the complete of the co	further agree to ice of my duties, provided for in egistered office of this change.
(Signature Registered Agent)	SEI DIVISI
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	FILECRETAR SION OF C
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