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· COVER LETTER

Division of Corporations		,
SUBJECT: MACKENZIE OIL, LLC		·
(Name of L	Limited Lial	bility Company)
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter	to the following:
Glenn E. Straub		
(Name of Person)	-	<u> </u>
Pishon Partners, LLC		
(Firm/Company)	-	
505 S. Flagler Drive, Suite 1002		
(Address)		
West Palm Beach, FL 33401		
(City/State and Zip Code)		
For further information concerning this matte	er, please ca	all:
Glenn E. Straub	at (561	655-4441
(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	ng amount:	
\$25 Filing Fee		

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: Mackenzie C	DII, LLC			
2. The mailing address of the limited liability company is:	505 S. Flagler Drive, Suite 1002			
West Palm Beach, FL 33401				
10/4/2005	L05000097793			
3. Date of filing/registration in Florida	4. Document number			
5. The name of the registered agent and the registered office Florida Department of State:	address as shown on the records of the			
Corporate Creations Network,	Inc.			
Name				
11380 Prosperity Farms Road #221E				
Address				
Palm Beach Gardens, FL 33410				
City, State and Zi	p			
6. The name and address of the new registered agent and/or office: Pishon Partners, LLC Name 7007				
Pishon Partners, LLC				
Name				
505 S. Flagler Drive, Suite 1002	1±3 +-₹. •			
Florida street address (P.O. Box l				
West Palm Beach, FL 3340	3: 0 I			
City, State and Zip				
If the limited liability company is not organized under the laws of the State of Florida, it is hereby				

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)

Glenn E. Straub

(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.

(Signature of Registered Agent)

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