

L060000080411

Florida Department of State  
Division of Corporations  
Public Access System

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 AUG 15 AM 9:33

## Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H06000204806 3)))



H060002048063ABC-

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

Division of Corporations  
Fax Number : (850) 205-0383

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

RECEIVED

06 AUG 15 PM 3:43

DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.****bryan petroleum 105 llc**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

J. BRYAN AUG 16 2006

## ③

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 AUG 15 AM 9:33

**The name of the Limited Liability Company is:**

**ARTICLE II - ADDRESS:**

**PRINCIPAL OFFICE ADDRESS:**

MAILING ADDRESS

19075 N.W. 37<sup>TH</sup> AVE.  
MIAMI, FL. 33056

**The name and the Florida street address of the registered agent are:**

**MOHAMMAD SIDDIQUE**  
(NAME)

**19075 N.W. 37<sup>TH</sup> AVE.**  
**FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)**

**MIAMI, FLORIDA 33056**  
CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING 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, FS.

REGISTERED AGENT SIGNATURE

**The name(s) and address (es) of each Manager or Managing Member is as follows**

**Name and address:**

**MGRM = Managing Member**

19075 N.W. 37<sup>TH</sup> AVE.  
MIAMI, FL. 33056

19075 N.W. 37TH AVE.  
MIAMI, FL. 33131

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 AUG 15 AM 9:33

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

**SIGNATURE OF A MEMBER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**MOHAMMAD SIDDIQUE**

Typed or printed name of signed

How do you solve