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(Re	equestor's Name)		
(Ac	ddress)		
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(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Zenas Petroleum, LLC (Name of L	imited Liability	Company)
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	Office Change an	d fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to th	e following:
Stefan R. Shubert (Name of Person)		
Fisher, Tousey, Leas & Ball, P.A	<u>.</u>	
501 Riverside Avenue, Suite 600 (Address)		
Jacksonville, Florida 32202 (City/State and Zip Code)		
For further information concerning this matter	er, please call:	
Stefan R. Shubert	at ( 904	356-2600
(Name of Person)	(A	rea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regisi Divisi P.O. E	AING ADDRESS: ration Section on of Corporations Box 6327 assee, Florida 32314
Enclosed is a check for the following	g amount:	
	□ \$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 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 co	ompany is: Zenas Petroleum, LLC		<del></del>
2. The mailing address of the limited	liability company is : 3320 Vineland Ro	ad	
Orlando, Florida 32811			
12/29/2006 L07000000008			
3. Date of filing/registration in Florid	a 4. Document num	ber	
5. The name of the registered agent ar Florida Department of State:	nd the registered office address as shown o	n the records of th	.e
Kloeppe	l, Marvin C		
	Name		
818 North	n A1A, Suite 104		
	Address		
Ponte Ve	dra Beach, Florida 32082		
<del></del>	City, State and Zip	0	PV
6. The name and address of the new re	egistered agent and/or office:	7 SEP 14	SECRE
Fisher, To	ousey, Leas & Ball, P.A.	=	무두
	Name		
818 North	A1A, Suite 104	P	Y OF ST
Florida str	eet address (P.O. Box NOT acceptable)	ယ္	RAT
Ponte Ved	dra Beach <sub>FL</sub> 32082	28	TATE
	City, State and Zip		

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)

MARVIN C. KLOEPPEL, | AUTHORIED REPRESENTATIVE

(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) BEVERLY H. FURTICK - PRESIDENT

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