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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

NOV 1 2 2008

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Capital	Oil & Gas Ventures	LLC			+
(Name of Limited Liability Company)					
	Amendment and fee(s) are sub				
	MARC A. ZIROGIANNIS	3			
		(Name of Person)	<u> </u>		
	ATTORNEY AT LAW				
		(Firm/Company)		⊣.	
	1065 OLD COUNTRY R	OAD-STE 204		SECR ALLA	08
٧.	,	(Address)	· · · · · ·	YEAR VIEW	ĕ F
	WESTBURY, NY 11590			SEE,	
		(City/State and Zip Code)		FICE ST	≅ □
For further information of	concerning this matter, please c	call:	·	ATH S	D 2: 00
MARC A. ZIROGIANN	IIS, ESQ.	at (516) 333-6200			
(Name	of Person)	(Area Code & Daytime To	elephone Number	·)	
Enclosed is a check for t	he following amount:				
△ \$25.00 Filing Fee .	□\$30.00 Filing Fee & Certificate of Status	□\$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Registi Divisio P.O. B	AING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 3230,1	ns		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Capital Oil & Gas Ventures LLC (Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 4/3/2008 and assigned Florida document number L08000034046 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" on the abbreviation "L.L.C." 777 S. Flafler Dr. Enter new principal offices address, if applicable: West Tower Ste 800 (Principal office address MUST BE A STREET ADDRESS) West Palm Beach, FL 44301 Enter new mailing address, if applicable: PO BOX 31623 (Mailing address MAY BE A POST OFFICE BOX) PALM BEACH GARDENS, FLA 33420 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

(Zip Code)

If amending the Managers or Managing Members'on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action
MR	LAWSON MCLESTER	12973 CALAIS CIRCLE PALM BEACH GARDEN	S. FLA 33420 P7 Remove
			
			Add Remove
			Add Remove
			= ,
			- Damasa
D. If amen	ding any other information, en	er change(s) here: (Attach additional	sheets, if necessary.)
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_			PH 2: 09 STATE FLORIDA
Dated OCT	OBER 31	, 2008	
	Signature of	a member or authorized representative of	a member
	MARC A. ZIRO	OGIANNIS, ESQ Typed or printed name of signee	
		i ypeu or printeu name or signee	

Page 2 of 2

Filing Fee: \$25.00