| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
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Office Use Only

G. MCLEOD

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**EXAMINER** 



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|  | ,  |  |   |  |  |
|  | •  | COVER LETTER   |   |  |  |
| TO: Registration Section<br>Division of Corpora  |  |  |   |  |  |
| SUBJECT: COLUM   |  | M EXPLORATION (CPX   | ), LLC  |  |  |
|  | Name of Limit                                | ed Liability Company   |   |  |  |
| The enclosed Articles of Ame   | · ·  | <u>-</u>   |   |  |  |
|  | CHE  | STER F. ENGLISH 3RD  |   |  |  |
| -  |  | Name of Person   |   |  |  |
|  | ENGLI  | SH DISTRIBUTION, INC.  |   |  |  |
|  | <u> </u>                                     | Pirm/Company   | -   |  |  |
| _  | 25   | 1 DIXIE BOULEVARD  |   |  |  |
|  |  | Addross  |   |  |  |
| DELRAY BEACH, FLORIDA 33444  |  |  |   |  |  |
| City/State and Zip Code  |  |  |   |  |  |
| STIMCONSUL@AOL.COM  E-mail address: (to be used for future annual report notification) |  |  |   |  |  |
| For further information conce  | rning this matter, please or                 | di:  |   |  |  |
| STEPHEN G. 8   | STIM, ATTORNEY                               | a <sub>1</sub> (212) 9   | 777950  |  |  |
| Name of Pen  | lon  | Area Coda & Daytime T  | elephone Number   |  |  |
| Enclosed is a check for the fo   | llowing amount:                              | ,  |   |  |  |
| \$25,00 Filing Fee   | 330.00 Filing Fee &<br>Certificate of Status | Certified Copy (additional copy is enclosed)   | S60.00 Filing Pee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |  |

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLUMBIA PETROLEUM EXPLORATION (CPX), LLC

| (Name of the Limited Liability Com<br>(A Florida Limite  | ipany as it now appear<br>ed Liability Company) | rs on our records.)                |                   |
|--|---|------------------------------------|-------------------|
| The Articles of Organization for this Limited Liability Comp.  Florida document number   | any were filed on                               | 2/18/2009 and ass                  | signed            |
| This amendment is submitted to amend the following:  |   |                                    |                   |
| A. If amending name, enter the new name of the limited i   | iability company he                             | C€1                                |                   |
|  | ROLEUM, LLC                                     |                                    |                   |
| The new name must be distinguishable and end with the words "L<br>"L.L.C."   | Imited Liability Compi                          | any," the designation "LLC" or the |                   |
| Enter new principal offices address, if applicable:  |   |                                    | DIVISION OF SECUL |
| Principal office address MUST BE A STREET ADDRESS  | 2   |                                    | 유 로움              |
| Enter now mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  B. If amending the registered agent and/or registered registered agent and/or registered. | office address on                               | our records, enter the name o      |                   |
| Name of New Registered Agent:  |   |                                    |                   |
| New Registered Office Address:   | <u>E</u> n                                      | ter Florida street oddress         |                   |
| ·  |   | , Florida                          | <del></del>       |
|  | City  | Zip Code                           | B                 |

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 abligations 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.

If Changing Registered Agent, Signature of New Registered Agent

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:

| Title         | <u>Name</u>                      | Address                                     | Type of Action     |
|---------------|----------------------------------|---|--------------------|
| <del></del> - |                                  |   | 7 Add Remove       |
|               |                                  |   | Add Remove         |
| <del></del>   |                                  |   | Add T Remove       |
|               |                                  |   | Add<br>Remove      |
|               |                                  |   |                    |
| <del></del>   |                                  |   | ===                |
| D. If amen    | ding any other information, ente | er change(s) here: (Attach additional shee. | ts, if necessary.) |
| _             |                                  |   |                    |
| _             |                                  |   |                    |
| Dated         | OCTOBER 2                        | 2009  |                    |
|               | /                                |   |                    |

Page 2 of 2

Filing Fee: \$25.00