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S. HAWKES

OCT 2 7 2009

EXAMINER

## **COVER LETTER**

Division of Corporation	ons			
SUBJECT:	SCOT	T'S GAS, LL	.C	
	Name of Limite			
Dear Sir or Madam:				
The enclosed Registered Age	nt/Registered Office	Change and fee	(s) are submitted for filing	•
Please return all corresponder	nce concerning this n	natter to the foll	owing:	
BLAIR M. Name of	JOHNSON			
Name of	rerson			
RI AIR M IO	HNSON, P.A.			
		<u> </u>		
Firm/Cor				
P.O. BO	X 770496			
Addres	is '	<del>.</del> .	e e e e e e e e e e e e e e e e e e e	
•		٠	•	
WINTER GARDE	N, FL 34777-0496			
City/State and				
blairmjohnson@ E-mail address: (to be used for fi	embargmail.com	ion		
E-man address. (to be used for it	nure annual report nottireat	ion)		
For further information conce	rning this matter, ple	ease call:		
Blair M. Johnso	on at (	407)	656-5521	
Name of Person		Area Code	& Daytime Telephone Number	
STREET/COURIER A	ADDRESS:	MAILING.	ADDRESS:	
Registration Section		Registration Section		
Division of Corporation	S	Division of Corporations		
Clifton Building		P.O. Box 6327		
2661 Executive Center (	Circle	Tallahassee,	Florida 32314	
Tallahassee, Florida 323	01	·		
Enclosed is a check for the following amount:				
<b>√</b> \$25 Filing Fee	·	\$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. Name of the limited liability company:	SCOTT'S GAS, LLC
2. (a) Principal office address of limited liability company	y: SCOTT'S BAS, CC
(Note: MUST BE STREET ADDRESS)	242 South Congress Avelue West Palm Beach, FL 3349
(b) Mailing address of limited liability company:	SCOTT'S GES LLE
(Note: MAY BE POST OFFICE BOX)	242 South Congress Avenue West Palm Beach, FL 33409
08/06/2009	L09000075633
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	DONALD S. GRIGGS
Registered Office Address:	150 E. Robinson St., Unit #2803 Orlando, FL 32801
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	DONALD S. GRIGGS
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	242 South Congress Avenue West Palm Beach ,FL33409
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office tical. Or, in the case of a Florida limited
DONALD S. GRIGGS Printed or typed name of signee	<del></del>
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	igree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in the registered office y 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