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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Email Address:____

🖺 e email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC REGISTERED AGENT CHANGE **CARBONFILT LLC**

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: CARBONFIL	<u> LLC</u>				
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (t _)	Mailing address of limited liability (Note: MAY BE POST OFFIC		
3.		10/07/2009 Date of filing/registration in Florida	- - 4.	L090000	096736 Document number		
5. (a)		INCORP SERVICES, INC. Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State	 e:		
		3458 LAKESHORE DRIVE			•		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_		
					_		
		TALLAHASSEE FL	32312		_		
((b)	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office address:		SECRETAL TALLAHAS	APPA AI		
		7901 4th St N					
		NEW Registered Office Address: STE 300			PH 72: L4		
		St. Petersburg , FL	33702	2	· -		
the agei was the Si	chai nt w /we artic / gnat ereb	mited liability company is not organized under the law age or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law was a member or authorized representative of a member by accept the appointment as registered agent and agree	the regis bility co the lim imited l	stered office ompany, it is ited liability iability com	e and the business office of the shereby confirmed that the case of the shereby company or as otherwise propany. Robin Jones Printed or typed name of signee active. I further garge to company.	he registered thange(s) rovided in	
noti	[tea	ons of all statutes relative to the proper and complete pations of my position as registered agent as provided ly reflect a change in the registered office address, I have in writing of this change.		ance of my c Chapter 605 onfirm that t	duties, and I am familiar wit i, F.S. Or, if this document i the limited liability company	h and accept s being filed has been	
ر Sigr	'(ΔΥ(c) Tatur	David Roberts - Assistant Secretary	,				