

L11000033433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

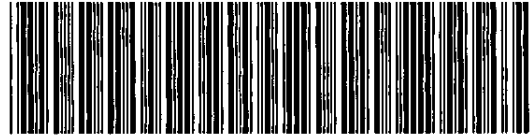
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500241517505

11/08/12--01011--024 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 NOV 14 PM 2:45

FILED

W12-56883

J. BRYAN

NOV 15 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Name Change
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tedd Howsare
Name of Person

Zinn Media Inc
Firm/Company

PO Box 7553
Address

Delray Beach, Florida 33482
City/State and Zip Code

accounting@zinnmedia.com
E-mail address: (to be used for future annual report notification)

FILED
2012 NOV 14 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

tedd howsare at (954) 5982111
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2012

TEDD HOWSARE
ZINN MEDIA INC
PO BOX 7553
DELRAY BEACH, FL 33482

SUBJECT: BLACK KNIGHT OIL AND GAS, LLC
Ref. Number: L11000033433

FILED
2012 NOV 14 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BLACK KNIGHT OIL AND GAS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan
Regulatory Specialist II

Letter Number: 012A00027261

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

BLACK KNIGHT OIL AND GAS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2012 NOV 14 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/18/2011 and assigned
Florida document number L11000033433.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

OG OIL COMPANY LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

217 EAST ATLANTIC AVENUE

(Principal office address MUST BE A STREET ADDRESS)

DELRAY BEACH FLORIDA 33444

Enter new mailing address, if applicable:

OG OIL COMPANY LLC C/O ZINN

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 7553

DELRAY BEACH FL 33482

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

Florida

City

Zip Code

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.

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:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

I would like to change the address for each of the following members:

Kamran Rahimov

6 Bakikhanov Street 12th Floor Bridge Plaza, Baku, Azerbaijan 1022

Randall Fenley

7919 Mountain Shore Drive, Sherrills Ford, NC 28673

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 NOV 14 PM 2:45

FILED

Dated OCTOBER 24, 2012.



Signature of a member or authorized representative of a member

RANDALL FENLEY

Typed or printed name of signee