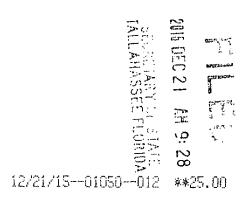
L13000073641

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sources Lind, Name,
(Document Number)
(Socialistic Hamber)
Codified Coming Codification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
î.
,

Office Use Only



900279561519



DEC 22 Proc.

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Florida LNG Group, LLE Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Statement of Correction and fee(s) are submitted	or filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
KEVIN Powers Name of Person		
Name of Person		
Firm/Company		
15328 Swwarfield Divel		
Tridiantown, FL 34956 City/State and Zip Code		
City/State and Zip Code		
E-mail address: (to be used for future annual report notific	ation)	
For further information concerning this matter, please call:		
Kevin Powers at (T	12) 240 6898	
Name of Person Are	ea Code Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee \$30 Filing Fee & \$55 Fil Certificate of Status Certified C	ing Fee & S60 Filing Fee, opy Certificate of Status & Certified Copy	

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. +lorida LNG Group, LLC **FIRST**: The name of the limited liability company is: The Florida Document number of the limited liability company is: 4/300007364/ SECOND: Document to be corrected is: Articles THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: REgistered Agent Name + Address: <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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 605, 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. Registered Agent's Signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)