## 213000011

(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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S. WARREN AUG 1 7 2017

## CEVER LETTER

	gistration Section vision of Corporations				
SUBJECT	American Power & Gas of CA, LLC				
	Name of Limited Liability Company				
Dear Sir or	Madam:				
The enclos	ed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.			
Please retu	rn all correspondence concerning th	is matter to the following:			
Lisa Barr	ry				
	Name of Person				
Americar	n Power & Gas of CA, LLC				
	Firm/Company				
10601 B	elcher Road South				
	Address	N			
Seminole	e, FL 33777				
	City/State and Zip Code				
corporati	ons@goapg.com				
E-ma	il address: (to be used for future and	ual report notification)			
For further	information concerning this matter.	please call:			
Lisa Barr	У	727 479-0731			
	Name of Person	Area Code & Daytime Telephone Number			
Rej Div Cli 260	GREET/COURIER ADDRESS: gistration Section vision of Corporations ifton Building 61 Executive Center Circle Ilahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314			
Enclosed is a check for the following amount:					
<b>2</b>	\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (2/1	14)				

## 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

I. N	ame of the limited liability company: American	Power & Gas	of CA, LLC		
2. (a)	(b) same as office address				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	10601 Belcher Road South				
	Seminole, FL 33777				
	3/05/2012				
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	Cummins, Tom				
	Registered Agent and Registered Office shown on the record Registered Office Address (MUST BE FLORIDA STRE	· -	constate:		
	10601 Belcher Road South		<b>7</b>		
	Seminole	. FL_33777	AUG		
(b)	Northwest Registered Agent, LLC		ILED 11 PHI2: 16		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office address	100 T <b>2</b>		
	Northwest Registered Agent, LLC	16 16			
	NEW Registered Office Address:				
	3030 N. Rocky Point Dr. STE 150A				
	Tampa	, FL_33607	<u>.                                    </u>		
the cha agent i was/w	limited liability company is not organized under the ange or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of	s of the registered d liability compa ers of the limited	d office and the business office of the registered ny. it is hereby confirmed that the change(s) liability company or as otherwise provided in		
		Tom Ct	ummins		
Signa	iture of a member or authorized representative of a member		Printed or typed name of signee		

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.

Printed or typed name of signee

Signature of Registered Agent Tom Glover, Manager