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(Requestor's Name)						
(Address)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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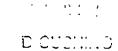


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Ra Chang



COVER LETTER

Division of Corporations	
Chaudhary Petroleum Group LLC SUBJECT:	
	ed Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Binod Chaudhary	
Name of Person	
Westlake Fueling	
Firm/Company	
4670 Seminole Pratt Whitney Rd	
Address	
Westlake, FL 33470	
City/State and Zip Code	
admin@cgpetro.com	
E-mail address: (to be used for future annual report r	notification)
For further information concerning this matter, please call	
Laura Mulens 561	307-2480
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
D \$25 Filling Fee	S55 Filing Fee & Certified Copy
INHS18 (2/14)	

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 Florida.

1. Ni	ame of the limited liability company: Chaudhary Petrol	leuni C	Group	LLC					
2. (a)	4670 Seminole Pratt Whitney Rd		(b)	4670 Sen	ninole Pratt Whitney	Rd			
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(~,		Mailing address of lim				
	Westlake, FL 33470			Westlake.	. FL 33470	<u> </u>	-		
3.	10/7/2020 Date of filing/registration in Florida	— — 4.	_	.20000306	Document number				
5. (a)									
, ,	Registered Agent and Registered Office shown on the records of Binod Chaudhary	the Flo	orida l	Dept. of Sta	ute:				
	Registered Office Address	ADDR	ESS)		_				
	Delray Beach, Fl	33440	6		_				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Binod Chaudhary	i Office	ffice address:		-	- : 		2022 APS 2	e so e di so
	NEW Registered Office Address:						:	(C)	
	4670 Seminole Pratt Whitney Rd				_				ç
	Westlake, FI	33470)		_	. •	· :··	3: 50	
change agent v was/wo	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	regis ability of the limite	tered con limited lia	l office ar apany, it i ed liabili	nd the business officies hereby confirmed ty company or as of mpany.	ce of the	regis chai	stered ige(s)	
Signa	Signature of a member or authorized representative of a member				Printed or typed nam	ie of signee			
provisi the obl to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I i I in writing of this change	perfo.	rmar	ice of mv	duties, ånd Lam fa	miliar wi	th ar	nd acc	ent
Signatu	re of Registered Agent								