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DOCUMENT # L9900004503						•			
1. Entity Name PEACE RIVER STATION, L.L.C.					FILED				
·					01 FEB -5 PM 3: 14				
Principal Place of Business Mailing Address					]	CLODES -	3: 14		
163 EAST MOORE BLVD., STE 200 163 EAST MOORE BLVD., STE 200 WINTER PARK FL 32789 WINTER PARK FL 32789						SECRETARY OF TALLAHASSEE, F	STATE		
							LUKIUA 		
2. Principal Place of Business  3. Mailing Address  NORSE						1 1951/91) 416 191/9 191/) 961// 961/I ABI	11 <b>60</b> 161 <b>14</b> 614 <b>6</b> 46 <b>0</b> 4 <b>6</b> 1611		
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Star	te	City & State			4. FEI Number 35/19/66/6 Applied For Not Applicable				
Zip	Country	Zip	Coun	try	5. Certi	ficate of Status Desired	\$5.00 Add	ditional	
	7. Name and Address of New Registered Agent								
WHITING JR, MACAULEY				Name					
163 EAST MORSE BLVD., STE 200 WINTER PARK FL 32789				Street Address (P.O. Box Number is Not Acceptable)					
WINSER FARE PL 32/09				City	<del></del>		■■ Zin Cod		
					FL Zip Code				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required wh						nd)	DATE		
						-97			
		í		FEE IS \$50.00 Department of	State				
9. MANAGING MEMBERS 10.						ADDITIONS/CHA	NGES		
TITLE	MGRM	Dolote	TITLE			ADDITIONS/CHA	☐ Change	Addition	
NAME	NATIONS ENERGY CORPORATION AND AMERICAN AMERICAN					•			
STREET ADDRESS CITY-ST-ZIP	WINTER PARK FL			ET ADDRESS   ST-ZIP		•		1	
TITLE	MGRM	INC Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	DECKER ENERGY-PEACE RIVER, INC.  163 EAST MORSE BLVD., STE 200			ET ADDRESS		2000036 -02/09/0	73122	==0	
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STREET A LESS			NAME STREE	T ADDRESS					
CITY-ST P				ST-ZiP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.									
010:::=	TAVA SEEL	NING LOUG N		· ,		1-21 01			
SIGNAT	SIGNATURE AND TYPED OR PRINTED NAME	F SIGNING MANAGING MEMBER, MA	NAGER, OR	AUTHORIZED REPRESEN	TATIVE	1-31-01 Date	Daytime Phone #		