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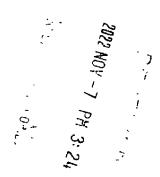
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 091888 7611799 AUTHORIZATION : COST LIMIT : ORDER DATE: November 1, 2022 ORDER TIME : 1:33 PM ORDER NO. : 091888-185 CUSTOMER NO: 7611799 CHANGE OF AGENT NAME: SOUTHEAST DIRECTIONAL DRILLING, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
PLAIN STAMPED COPY CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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.	Na	ame of the limited liability company: SOUTHEAST DIRECTIONAL DRILLING, LLC					
	(a)	3117 North Cessna Avenue		400	E. Las Colinas Boulevard, Suite 800		
۲.	(")	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-	·/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	_	
		Casa Grande, AZ 85122	_	Irving	ng, TX 75039	_	
		06/20/2005		M0500	000003347		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	C T Corporation System					
	(11)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. o	of State:		
		1200 South Pine Island Road					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2			
					022		
		Plantation	33324		2022 &c y		
		, FL	<u> </u>		-7		
	/h\						
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:			
		Corporation Service Company					
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallahassee, FL_	32301				
cha age	inge ent w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited lial tree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	s of the registere bility co Tthe lim	d office mpany, ited lia	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in	ne	
		Cilmi			Authorized Person		
		ure of a member or authorized representative of a member			Printed or typed name of signee	_	
Ill pro the to t	nereb ovisio obli mere tiftea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	e to act performa for in C ereby co	in this ince of hapter nfirm t	s capacity. I further agree to comply with the funy duties, and I am familiar with and acce or 605, F.S. Or, if this document is being file that the limited liability company has been	e or d	
			•	poration Service Company i M. Casper, Asst. Vice President			