

Division of Corporations

Page 1 of 1

**MD5000006805**

Florida Department of State  
Division of Corporations  
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Division of Corporations  
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Account Name : C T CORPORATION SYSTEM  
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TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

ALTA MESA GP, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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Electronic Filing Menu

Corporate Filing Menu

Help

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.503, 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. Name of the limited liability company: Alta Mesa GP, LLC

2. (a) Principal office address of limited liability company: 15415 Katy Freeway, Ste. 800  
(Note: MUST BE STREET ADDRESS) HOUSTON, TX 77054

(b) Mailing address of limited liability company: 15415 Katy Freeway, Ste. 800  
(Note: MAY BE POST OFFICE BOX) HOUSTON, TX 77054

3. Date of filing/registration in Florida: 12/12/2005 4. Document number: M05000000005

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Capital Connection, Inc.

Registered Office Address: 417 E Virginia St., Ste. 1  
Tallahassee, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: CT Corporation System

NEW Registered Office Address: 1200 South Pine Island Road  
(MUST BE FLORIDA STREET ADDRESS) Panorama, FL 32324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Michael E. Ellis  
(Signature of a member or authorized representative of a member)

MICHAEL E. ELLIS  
(Printed or typed name of 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 608, 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.

By: Jane Zachritz  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

TM0501 (05/08)

11415 - CORPORATIONS System Office

**Jane Zachritz**  
Assistant Secretary

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