(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
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CORPORATION	SERVICE	COMPANY
COMPONATION		COMETMI

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195								
REFERENCE : 820570 8417904								
AUTHORIZATION: Spelle had								
COST LIMIT : \$25.00								
ORDER DATE : June 16, 2023								
ORDER TIME : 4:31 PM								
ORDER NO. : 820570-054								
CUSTOMER NO: 8417904								
CHANGE OF AGENT								
NAME: MAVERICK OPERATING GP, LLC								
MANE. MAVERICK OFERATING GF, DEC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Alexxis Weiland-sorenson								
CONTACT FERSON: ATEXXIS WEITANG-SOLENSON								

EXAMINER'S INITIALS:

STÅTEMENT 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	me of the limited liability company: MAVERICK O	PERATIN 	√G 	GP LLC	
	(a)	Principal office address of limited liability company:				lailing address of limited liability company:
		(<u>Note: MUST BE STREET ADDRESS</u>)			,•	(Note: MAY BE POST OFFICE BON)
		1111 Bagby Street Ste. 1600			1111 Bagt	by Street Ste. 1600
		Houston, TX 77002			Houston, [^]	TX 77002
		05/18/2007		ľ	M0700000:	2974
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)					
	,	Registered Agent and Registered Office shown on the records of CAPITOL CORPORATE SERVICES, INC.	of the Florid	ia I	Dept. of State	:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			IA.	
		515 EAST PARK AVENUE 2ND FL			2023 (LLC)	
		TALLAHASSEE F	L 32301			2023 JUH 29 SECRETANASA ALL AHASSA
	(b)					
	(-)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	ddi	ress:	
		Corporation Service Company				
		NEW Registered Office Address:				GD
		1201 Hays Street		_		
		Tallahassee F	l32301			
cha age wa	ange ent w s/we	mited liability company is not organized under the last or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e register iability co of the lin	red om nit	office and pany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
				CILMI, AUT	THORIZED PERSON	
	Ī.,	ure of a member or authorized representative of a member				Printed or typed name of signee
pro the to	ovisio obli mere	ny accept the appointment as registered agent and as ons of all statules relative to the proper and complete gations of my position as registered agent as provid by reflect a change in the registered office address, little writing of this change.	e perform ed for in (hereby c	ian Ch on	ce of my d apter 605, firm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been ASST. VICE PRESIDENT
Sig	natur	e of Registered Agent	Great CL	L.	a Kiikis (,	AGOT, FIGISTICATION