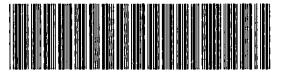


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## COVER LETTER

Division of Corporations Powder River Development Services, LLC Name of Limited 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: Linda Aganon Name of Person Powder River Development Services, LLC Firm/Company 219 S Wooddale Avenue Eagle, ID 83616 City/State and Zip Code linda.aganon@powderriverdev.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Linda Aganon STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

TO:

Registration Section

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.	Nan	ne of the limited liability company: Powder River Developm	ent Services, LLC	
2.	(a)	Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	219 S Wooddate Avenue Eagle, ID 83616	
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same	
14.	20. 2	007	VII. F	
	y 30, 2 Dat		4. Document number	
5	(a) Registered Agent and Registered Office shown		he records of the Florida Dent of State.	
J.	(4)	Registered Agent:	Deb Fowler	
		Registered Office Address:	518 HEATHEROAK COVE ALTAMONTE SPRINGS, FL 32714	
			ACTAINMENT OF TAINOUT FORTH	
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			
		NEW Registered Agent:	David A. Allen	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)			165 N River Drive E	
		MOST BE TECKIDA STREET ADDRESS	Jupiter 33458 ,FL	
ar lia th	onfiri id the abilit e me e op	imited liability company is not organized under the lend that after the change or changes are made, the Flee business office of the registered agent will be idently company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of	
_		. Dewhirst	_	
		or typed name of signee	_	
T car C ac	here impli nd l c hapt lakes	by accept the appointment as registered agent and a y with the provisions of all statutes relative to the prom familiar with and accept the obligations of my poer 608, F.S. Or, if this document is being filed to me is I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	
Ś	gnatu	re of Registered Agent		

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