Division of Corporations Electronic Filing Cover Sheet

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(((H140000924123)))



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To:

Division of Corporations

Fax Number

Fax Number

: (850)617-6383

\*RE-SUBMIT\*

From:

Account Name

ст совроватиом system of the confidence of the

Account Number : FCA000000023 Phone

: (850)222-1092 : (850)878-5368

date of submission 4/17

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Emmil Address:

## LLC REGISTERED AGENT CHANGE NGL CRUDE LOGISTICS, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

4/17/2014

1 4

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: NGL CRUDE LOGISTICS, LLC	
Name of Limited	d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office (	Change and facts) are submitted for filing
The cholosed Kegisteled Agend Kegisteled Office	Sumile and realth was applicated for runner
Please return all correspondence concerning this m	atter to the following:
Name of Person	
Firm/Company	
Address	
City/State and Zip Code	<del></del>
000000 === === === === === === === ===	
E-mail address: (to be used for thiure annual report notificati	on)
For further information concerning this matter, ple	ase call:
at (_	Area Code & Daytime Telephone Number
Name of Person	Arca Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Bullding	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Plorida 32301	
Enclosed is a check for the following am	ount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (12/13)	•

·	16 F/1
STATEMENT OF CHANGE OF REGISTERED OF BOTH FOR LIMITED LIABILITY COMPANY	FICE OR REGISTERED AGENT OR
Pursuant to the provisions of sections 605.0114, Flor company submits the following statement in order to che both, in the State of Florida.	rida Statutes, the undersigned limited liability ange its registered office or registered agent, or
1. Name of the limited liability company: NGL CRUDE L	OGISTICS, LLC
2. (a) Principal office address of limited liability comparation (Note: MUST BE STREET ADDRESS)	ny: 1331 LAMAR ST, STE. 1650 HOUSTON, TX 77010
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1331 LAMAR ST, STE, 1650 HOUSTON, TX 77010
06/20/2008	M08000002944
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:
Registered Agent: THE	PRENTICE-HALL CORPORATION SYSTEM, INC.
Registered Office Address:	1201 HAYS STREET TALLAHASSEE, FL 32301-2525
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	C T Corporation System
NEW Registered Office Address:  MUST BE FLORIDA STREET ADDRESS)	1200 South Pinc Island Road
	Plantation ,FJ_33324
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office entical. Or, in the case of a Florida limited (a) was were authorized by an affirmative vote of
Eddie Woods, Member Printed or typed name of signee  I hereby accept the appointment as registered agent and	 d agree to act in this capacity. I further agree to
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this accument is being filed to address, I hereby confirm that the limited liability composition System  By:  Signature of Registres Agent	

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

IN18518 (12/13)