1/2/25, 12:12 PM

Division of Corporations



Florida Department of State Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000001079 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:_____

LLC REGISTERED AGENT CHANGE HF SINCLAIR REFINING & MARKETING LLC

.....

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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 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.

	ame of the limited liability company: HF Sinclair Refu 2323 VICTORY AVENUE SUITE 1400		2323 VICTORY AVENUE SUITE 1400
!. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	DALLAS, TX 75219		DALLAS, TX 75219
	01/05/2011		111000000058
(a)	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.	Document number
	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	Dept, of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	PLANTATION, FI	33324	- >
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	t Office addr	ess:
	United Agent Group Inc.		
	NEW Registered Office Address:		(7)
	North Palm Beach Fl	33408	
ange ent w is/we	mited liability company is not organized under the lar or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the St registered ability com of the limite	tate of Florida, it is hereby confirmed that after office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
e artic	eres of organization of the operating agreement of the	mmeca nai	omey company.

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 605, 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.

Adia Myles Adia Myles, Special Secretary
Signature of Registered Agent