

M13000005023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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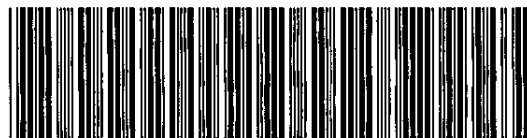
(Business Entity Name)

(Document Number)

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2013 OCT 24 AM 11:39
TALLAHASSEE, FLORIDA

B. BOSTICK

OCT 25 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Axiom Energy Solutions 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:

Aimee Rogers
Name of Person

Axiom Energy Solutions LLC
Firm/Company

Po Box 1466
Address

Savannah, GA 31402
City/State and Zip Code

arogers@axiomenergysolutions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aimee Rogers at (770) 480-2712
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

2013 OCT 24 AM 11:39
TALLAHASSEE, FL 32314

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. Name of the limited liability company: Axiom Energy Solutions LLC

2. (a) Principal office address of limited liability company: 499 E. Pascadena St.
(Note: **MUST BE STREET ADDRESS**) Meridian, ID 83646

(b) Mailing address of limited liability company: PO Box 1466
(Note: **MAY BE POST OFFICE BOX**) Savannah GA 31402

8/13/13
3. Date of filing/registration in Florida

M13000005023
4. Document number

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

Registered Agent:

Jerry Snider

Registered Office Address:

1837 Hendricks Avenue
Jacksonville, FL 32207

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

NEW Registered Agent:

Adam J. Buss, Esq.

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

Smith, Gambrell & Russell, LLP
50 North Laura Street, Suite 2600
Jacksonville, FL 32202

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.

Kevin Ricci
Signature of a member or authorized representative of a member

Kevin Ricci
Printed or typed name of signee

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.

Adam J. Buss
Signature of Registered Agent

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