## M150000007516

| (Re                                     | equestor's Name) |      |  |  |  |  |  |  |  |  |
|---|------------------|------|--|--|--|--|--|--|--|--|
| (Address)                               |                  |      |  |  |  |  |  |  |  |  |
| (Address)                               |                  |      |  |  |  |  |  |  |  |  |
| (City/State/Zip/Phone #)                |                  |      |  |  |  |  |  |  |  |  |
| PICK-UP                                 | ☐ WAIT           | MAIL |  |  |  |  |  |  |  |  |
| (Business Entity Name)                  |                  |      |  |  |  |  |  |  |  |  |
| (Document Number)                       |                  |      |  |  |  |  |  |  |  |  |
| Certified Copies Certificates of Status |                  |      |  |  |  |  |  |  |  |  |
| Special Instructions to Filing Officer: |                  |      |  |  |  |  |  |  |  |  |
|   |                  |      |  |  |  |  |  |  |  |  |
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Office Use Only



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SECRETARY OF STATE

**S Warren** APR 2 4 2017



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: April 19, 2017

Order#: 604388-003

Re: CROSSFIRE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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.

| ì.                              | Na                                    | me of the limited liability company: CROSSFIRE   | E, LLC d   | /b/a (                          | CROSSFIRE   | OILFIELD SI  | ERVICES L  | LC               |   |
|---------------------------------|---------------------------------------|--|--|---------------------------------|---|--|--|------------------|---|
| 2                               | (a)                                   |  |  | (b)                             |   |  |  |                  |   |
|                                 | (14)                                  | Principal office address of limited liability company:   | <del></del>                                      | (-)                             | Ma  | ailing address of l  |  |                  |   |
|                                 |                                       | (Note: MUST BE STREET ADDRESS)   |  |                                 | _   | (Note: MAY BE  | <u> </u>   | E BU             | ט                                       |
|                                 |                                       | 820 AIRPORT ROAD   |  |                                 | 820 AIRPO   | ORT ROAD   |  | <del></del>      | ····                                    |
|                                 |                                       | DURANGO, CO 81303  | <del></del>                                      |                                 | DURANGO   | O, CO 81303  |  |                  |   |
|                                 |                                       | 09/21/2015   | <del></del>                                      |                                 | M1500000  | 7516   |  |                  |   |
| 3.                              |                                       | Date of filing/registration in Florida   | 4.   |                                 | I   | Document num   | ıber   |                  |   |
| 5.                              | (a)                                   | REGISTERED AGENT SOLUTIONS, INC.   |  |                                 |   |  |  |                  |   |
| -                               | ,-,                                   | Registered Agent and Registered Office shown on the records  | of the Fl  | orida I                         | Dept. of State:   |  |  |                  |   |
|                                 |                                       | 155 OFFICE PLAZA DR. SUITE A   |  |                                 |   |  |  |                  |   |
|                                 |                                       | Registered Office Address (MUST BE FLORIDA STREE   | ET ADDR  | ESS)                            | <del></del>   |  |  |                  |   |
| •                               |                                       |  |  |                                 |   |  |  |                  |   |
|                                 |                                       | TALLAHASSEE, ,   | FL32   | 301                             |   | , .  | SECRETA<br>ALL:AHA                                       | 17 APR 2         | 11                                      |
| (b) Corporation Service Company |                                       |  |  | 3SS<br>Aay                      | 2   | _  |  |                  |   |
|                                 |                                       | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>   | red Uthe   | c add                           | ress:   | •  | <u> </u>   | 2                | Ш                                       |
|                                 |                                       | 1201 Hays Street   |  |                                 |   |  | [0]<br>[S]   | 6 1              | D                                       |
|                                 |                                       | NEW Registered Office Address:   |  |                                 |   |  |  | 5                |   |
|                                 |                                       |  |  |                                 |   |  |  |                  |   |
|                                 |                                       |  | ······································           |                                 |   |  |  |                  |   |
|                                 |                                       | Tallahassee ,  | FL 32  | 301                             | <del></del>   |  |  |                  |   |
| the<br>age                      | e cha<br>ent v<br>is/wi               | imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of t  | laws of<br>s of the t<br>d liabilit<br>rs of the | the S<br>egist<br>y cor<br>limi | State of Flor<br>ered office a<br>npany, it is l<br>ted liability | and the busine<br>hereby confirm<br>company or as  | ss office of<br>ned that the                             | the rep<br>chang | gistered<br>e(s)                        |
|                                 |                                       | A A  | _  | Stepl                           | hen V. Pate,  |  | 6 -i   |                  | <del></del>                             |
| l i<br>pro<br>thu<br>to<br>no   | here<br>ovisi<br>obl<br>mer<br>tified | by accept the appointment as registered agent and to one of all statutes relative to the proper and completing the registered agent as providing the registered office address, in writing of this change. |  |                                 | in this capac<br>nce of my di<br>hapter 605,<br>nfirm that th     | Printed or typed noity. I further uties, and I am F.S. Or, if this we limited liability, Assistant | agree to con<br>familiar wi<br>s document<br>lity compan |                  | rith the<br>laccept<br>ng filed<br>been |