

M150000 10299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

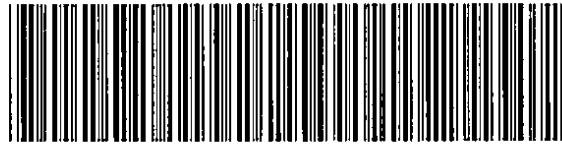
(Business Entity Name)

(Document Number)

ed Copies _____ Certificates of Status _____

el Instructions to Filing Officer:

Office Use Only



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11/29/22--01002--004 **75.00

RECEIVED

2022 NOV 28 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2022 DEC -1 PM 4:50

SECRETARY OF STATE
TALLAHASSEE, FL

M15-10299

12/1/22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EAGLE LNG PARTNERS JACKSONVILLE LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FARWA MOHSIN

Name of Person

EAGLE LNG PARTNERS JACKSONVILLE LLC

Firm/Company

2445 TECHNOLOGY FOREST BLVD, SUITE 500

Address

THE WOODLANDS, TEXAS 77381

City/State and Zip Code

LEGAL@EAGLELNG.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FARWA MOHSIN

at (832) 7090750

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 28, 2022

FARWA MOHSIN
EAGLE LNG PARTNERS JACKSONVILLE LLC
2445 TECHNOLOGY FOREST BLVD., STE 500
THE WOODLANDS, TX 77381

SUBJECT: EAGLE LNG PARTNERS JACKSONVILLE LLC
Ref. Number: M15000010299

We have received your document for EAGLE LNG PARTNERS JACKSONVILLE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Limited Liability Company, but your entity is a Foreign Limited Liability Company. Please complete and return the enclosed blank form(s).

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 522A00026181

2022 DEC -1 PM 4:21

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

FILED

2022 DEC -1 PM 4: 50

SECRETARY OF STATE
TALLAHASSEE, FL

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: EAGLE LNG PARTNERS JACKSONVILLE LLC

Enter new principal office address, if applicable: _____

**(Principal office address
MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable: _____

**(Mailing address
MAY BE A POST OFFICE BOX)**

2. The Florida document number of this limited liability company is: M15000010299

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 12/28/2015

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>SEAN LALANI</u>	<u>2445 Technology Forest Blvd, Suite 500</u>	<input checked="" type="checkbox"/> Add
		<u>The Woodlands, Texas 77381</u>	<input type="checkbox"/> Remove
<u>MGRM</u>	<u>TIMOTHY ROBERTSON</u>	<u>16236 Normandy Blvd</u>	<input checked="" type="checkbox"/> Add
		<u>Jacksonville, Florida 32234</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>FARWA MOHSIN</u>	<u>2445 Technology Forest Blvd, Suite 500</u>	<input checked="" type="checkbox"/> Add
		<u>The Woodlands, Texas 77381</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>FILIPE PINTO</u>	<u>2445 Technology Forest Blvd, Suite 500</u>	<input checked="" type="checkbox"/> Add
		<u>The Woodlands, Texas 77381</u>	<input type="checkbox"/> Remove
<u>MGRM</u>	<u>GUS LU and RICK MILLER</u>	<u>2445 Technology Forest Blvd, Suite 500</u>	<input type="checkbox"/> Add
		<u>The Woodlands, Texas 77381</u>	<input checked="" type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Sean Lalani

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

PAGE 1

The First State

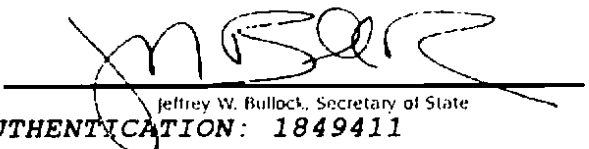
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "EAGLE LNG PARTNERS JACKSONVILLE LLC", FILED IN THIS OFFICE ON THE SEVENTH DAY OF NOVEMBER, A.D. 2014, AT 2:14 O'CLOCK P.M.

5629300 8100

141385523



You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1849411

DATE: 11-10-14

**STATE of DELAWARE LIMITED
LIABILITY COMPANY
CERTIFICATE of FORMATION**

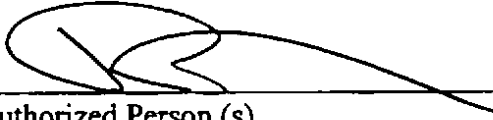
First: The name of the limited liability company is: **Eagle LNG Partners Jacksonville LLC**

Second: The address of its registered office in the State of Delaware is: Corporation Trust Center, 1209 Orange Street, in the City of Wilmington, Delaware 19801. The name of its registered agent at such address is The Corporation Trust Company.

Third: (Use this paragraph only if the company is to have a specific effective date of dissolution: "The latest date on which the limited liability company is to dissolve is _____.")

Fourth: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this 28 day of October, 2014.

By: 
Authorized Person (s)

Name: _____

**STATE of DELAWARE LIMITED
LIABILITY COMPANY
CERTIFICATE of FORMATION**

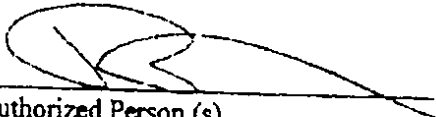
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Third: (Use this paragraph only if the company is to have a specific effective date of dissolution: "The latest date on which the limited liability company is to dissolve is _____.")

Fourth: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this 28 day of October, 2014.

By: 
Authorized Person (s)

Name: Richard Brown