## M18000008759

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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Account#: I20000000088

Date: July 29, 2019	Account#, 12000000	
Name: KEN HOWELL		
Reference #:1111638		
Entity Name: SIMS PETROL	EUM COMPANY, LLC	
Articles of Incorporation/Authorization t	to Transact Business	
Amendment		
✓ Change of Agent	ISSUES? CALL	
Reinstatement	KEN:	
☐ Conversion	518-213-0738	
Merger ·		
☐ Dissolution/Withdrawal		
Fictitious Name		
Other		
Authorized Amount: \$25.00		
\ \ \		
Signature:		

+1.212.947.7200

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability comparsubmits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

. Na	ame of the limited liability company: SIMS PE	I ROLEUM CC	DMPANY, LLC
(a)		(b)	
	Principal office address of limited liability company:  (Note: MUST RE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change	No	Change
	September 18, 2018		M18000008759
•	Date of filing/registration in Florida	4.	Document number
i. (a)	CORPORATION SERVICE COMPANY		
, (u)	Registered Agent and Registered Office shown on the records	of the Florida Dept.	of State:
	1201 HAYS STREET		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	
	TALLAHASSEE ,	FL 32301	19 JUL 29
(b)	COGENCY GLOBAL INC.		* * * * * * * * * * * * * * * * * * *
	Enter name of NEW Registered Agent and/or NEW Registe	red Office address:	
	115 North Calhoun St., Suite 4		
	NEW Registered Office Address:		
	Tallahassee	FL 32301	<del></del>
he cha gent v vas/wo	imited liability company is not organized under the ange of 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 membeicles of organization or the operating agreement of	laws of the State s of the registered d liability compar rs of the limited I	l office and the business office of the registe by, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	/ayne Sims	Wayne S	ims
Signa	ture of a member or authorized representative of a member		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 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.

/s/ Tim Mayville

Signature of Registered Agent

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