

P05000167440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

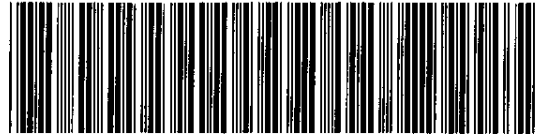
(Document Number)

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2008 FEB 29 PM 4:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DRR
2/29/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All Pro Gas, INC
(Name of Corporation)

DOCUMENT NUMBER: P05000167440

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

christopher E Ellison
(Name of Contact Person)

All Pro Gas, INC
(Firm/Company)

14144 CR 48
(Address)

Astatula FL 34705
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher E Ellison at (352) 551-8427
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2008

Christopher E. Ellison
All Pro Gas, Inc.
14144 CR 48
Astatula, FL 34705

SUBJECT: ALL PRO GAS, INC.
Ref. Number: P05000167440

We have received your document for ALL PRO GAS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the document as the registered agent on the line provided at the bottom of the page.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 008A00007562



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 19, 2008

ALL PRO GAS, INC.
14144 CR 48
ASTATULA, FL 34705

SUBJECT: ALL PRO GAS, INC.
Ref. Number: P05000167440

We have received your document for ALL PRO GAS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 208A00010565

*ATTN: Annette Ramsey
Please Date Back
from original receipt*

*thanks,
Della Ellise
OK # 1593*

2/28/08
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
2008 FEB 29 AM 8:00

RECEIVED

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: All Pro Gas, INC
2. The principal office address: 14144 CR 48 Astatula FL 34705
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/28/2005 Document number: P05000167440
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

All Florida Firm INC

813 Deltona Blvd suite A

Deltona FL 32725

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Christopher Ellison

14144 CR 48

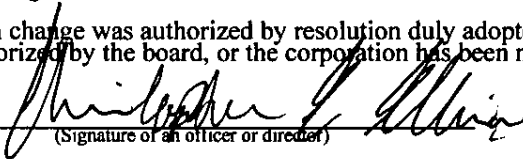
(P.O. Box NOT acceptable)

Astatula FL 34705

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Christopher E Ellison President

(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

X 
(Signature of Registered Agent)

1/28/2008

(Date)

If signing on behalf of an entity:

Christopher E Ellison

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32317

CR2E045 (8/05)

RECEIVED
2008 FEB 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA