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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	Thomason		Drilling		
	(Name of Corporation)				

DOCUMENT NUMBER: \$60790

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:

James E. Thomason

(Name of Contact Person)

Thomason Well Drilling Inc (Firm/Company)

328 Seminole Street (Address)

Ft Walton Beach Florida 32547 (City/State and Zip Code)

For further information concerning this matter, please call:

James E. Thomason at (850) 862-4613 (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

CR2E045 (8/05)

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

1. The name of	fthe corporation: Thomason Well Drilling Inc
2. The principal	ai office address: 328 Seminole Street
_	Fort Walton Beach Florida 32547
3. The mailing	address (if different):Same
4. Date of incor	prporation/qualification: 1991 Document number: \$60790
	nd street address of the current registered agent and registered office on file with the artment of State:
	Eugenia R Jones
	328 Seminole Street
	Fort Walton Beach Florida 32547
6. The name and (if changed):	James E. Thomason
	AAA NO CANANA AAAAAAAAAAAAAAAAAAAAAAAAAA
	(P.O. Box NOT acceptable) Fort Walton Beach Florida 32547
The street addr as changed will	ress of its registered office and the street address of the business office of its registered agent, Il be identical.
-	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, on the corporation has been notified in writing of the change.
-finger	James E. Thomason, President
	of the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance

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.

8/17/2007

(Date)

(Signature of Registered Agent)

H signing on behalf of an entity:

(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 32314

CR2E045 (8/05)