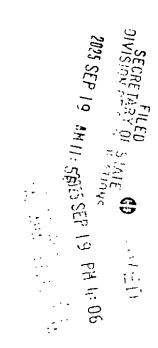
4P1P08

(Requestor'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:
J. HORNE
J. HORNE SEP 2 2 2025

Office Use Only



500454568325





CSC - Tallahassee CSC 1201 Hays Street

Tallahassee, FL 32301-2607 850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt - Shauna.Godbolt@cscglobal.com

Ext: x61563 Date: 09/19/25

Order #: 4406045-103
Re: HESS CORPORATION
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.0 - FL State Account Number: 12000000195

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Shauna Godbolt c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

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

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

	nge is submitted for a corporation or r to change its registered office or reg				
I. The name of t	he corporation: HESS CORPORATIO	NC			_
	office address:				_
1185 AVENUE	OF AMERICAS New York, NY 1003	36			_
3. The mailing a	ddress (if different): 1501 McKinney	St Houston, TX 77010			_
4. Date of incorp	ooration/qualification: 12/06/1952	Document nur	nber:	· -	
	I street address of the current registere tment of State: (If resigned, enter resi		office on tile with	the	
	CT CORPORATION SYSTEM				
	1200 S. PINE ISLAND ROAD				
	PLANTATION, FL 33324				
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered offi Corporation Service Company			20.25 SEP 19	DIVISION FART OF
	1201 Hays Street			0	
	P.O. Box NOT acceptable			3	;\$
	Tallahassee	FL :	32301	Mille 5	
	ess of its registered office and the str be identical.			registered agen	
Such change wa authorized by th	is authorized by resolution duly ado be board, or the corporation has been	nted by its board of dire i notified in writing of t	ectors or by an or the change.	incer so	
/s/ Scott Bar	ıks	Scott Banks		Authorized Sig	ner
I hereby accept I further agree to of my duties, an document is bein corporation Corporation	te of an officer of director the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the ng filed merely to reflect a change in been notified in writing of this chan n Service Company		or typed name and title is capacity, proper and comp, on as registered i address, I hereby	lete performan agent. Or, if th confirm that th	ce is ie
By: /s/ Grace F	Grace E. Kirby, 09/18/2025 Signature of Registered Agent Date				
2	nature of Registered Agent half of an entity:		Date		
5 0	Asst. Vice President				
	yped or Printed Name				
ιÿ	yped of Finned Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)
COA-471421