

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000005198

Entity Name: KAG MERCHANT GAS GROUP, LLC**Current Principal Place of Business:**4366 MOUNT PLEASANT ST NW
NORTH CANTON, OH 44720**Current Mailing Address:**4366 MOUNT PLEASANT ST NW
NORTH CANTON, OH 44720 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title CORPORATE CONTROLLER
Name MCNEMAR, JENNIFER H.
Address 4366 MOUNT PLEASANT ST NW
City-State-Zip: NORTH CANTON OH 44720

Title VP
Name MCNEMAR, JENNIFER H.
Address 4366 MOUNT PLEASANT ST NW
City-State-Zip: NORTH CANTON OH 44720

Title SECRETARY
Name MUSACCHIA, JACQUELINE A.
Address 4366 MT. PLEASANT ST., NW
City-State-Zip: NORTH CANTON OH 44720

Title GENERAL COUNSEL
Name MUSACCHIA, JACQUELINE A.
Address 4366 MT. PLEASANT ST., NW
City-State-Zip: NORTH CANTON OH 44720

Title EXECUTIVE VICE PRESIDENT
Name MUSACCHIA, JACQUELINE A.
Address 4366 MT. PLEASANT ST., NW
City-State-Zip: NORTH CANTON OH 44720

Title CFO
Name DELACEY, CHARLES
Address 4366 MOUNT PLEASANT ST NW
City-State-Zip: NORTH CANTON OH 44720

Title CEO
Name BLAISE, BRUCE
Address 4366 MOUNT PLEASANT ST NW
City-State-Zip: NORTH CANTON OH 44720

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES DELACEY

CFO

04/23/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date