2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State
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Entity Name: CATERPILLAR GLOBAL MINING LLC

Current Principal Place of Business:

97 E. CONGRESS STREET
TUCSON, AZ 85701

Current Mailing Address:

100 NE ADAMS STREET
AB 7310
PEORIA, IL 61629 US

FEI Number: 39-0188050

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	MGRM
Name	CATERPILLAR IPX LLC
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	VP
Name	WEISS, KARL
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	TREASURER
Name	DUPONT, CHRISTOPHE
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	ASST. SECRETARY
Name	BROMM, JARON
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	PRESIDENT
Name	SAVAGE, E JEAN
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	SECRETARY
Name	WILKEN, LAURENCE
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	ASST. SECRETARY
Name	BATES, GREGORY W
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

Title	ASST. TREASURER
Name	TAPHORN, MATTHEW
Address	100 NE ADAMS STREET
City-State-Zip:	PEORIA IL 61629

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: STEPHANIE UNDERWOOD — AUTHORIZED REPRESENTATIVE — 04/03/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date