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| -(Re | equestor's Name) | |
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| (Ac | ldress) | |
| (Ác | idress) | |
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| (C) | ty/State/Zip/Phone i | ") |
| PICK-UP | ☐ WAIT | MAIL |
| | usiness Entity Name | <u>=) </u> |
| (3.5 | | -, |
| (Dx | ocument Number) | |
| Certified Copies | Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
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| | Office Use Only | |



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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Matthew Ermak matthew.ermak@cscglobal.com

Date: November 6, 2019

Order#: 036813-005

Re: KPI BRIDGE OIL, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Matthew Ermak

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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

| statement of cha | nge is submitted for a corpo | 502, 617.0302, 607.1308, or 617.1308, Florida Statutes, this pration organized under the laws of the State of DELAWARE fice or registered agent, or both, in the State of Florida. |
|---|---|---|
| 1. The name of | the corporation: KPI BRIDGE | E OIL, INC. |
| 2. The principal | office address: 21 EAST FR | RONT STREET, SUITE 300, RED BANK, NJ 07701 |
| | | |
| 3. The mailing a | address (if different): | |
| 4. Date of incor | poration/qualification: 10/26 | 6/2016 Document number: F16000004870 |
| | d street address of the current rtment of State: (If resigned, | it registered agent and registered office on file with the enter resigned) |
| | CT CORPORATION SYST | ГЕМ |
| | 1200 SOUTH PINE ISLAN | ID ROAD, SUITE 250 FL 33324 72 72 72 |
| | PLANTATION | FL 33324 2 |
| 6. The name and (if changed): | d street address of the new re | egistered agent (if changed) and /or registered office . PH 6. |
| | Corporation Service Comp | pany 9 |
| | 1201 Hays Street | |
| | | P.O. Box NOT acceptable |
| | Tallahassee | FL 32301 |
| The street address changed will | ess of its registered office ar | nd the street address of the business office of its registered agent, |
| Such change was authorized by the | as authorized by resolution on the board, or the corporation | duly adopted by its board of directors or by an officer so has been notified in writing of the change. |
| | Liu & Comi | Jill Cilmi, Vice President |
| Signati | ine of an otheer or director | Printed or typed name and title |
| I further agree performance of agent. Or, if th hereby confirm | the appointment as register to comply with the provision my duties, and I am familia is document is being filed mathat the corporation has been Service Company | red agent and agree to act in this capacity. ns of all statutes relative to the proper and complete ar with and accept the obligation of my position as registered nerely to reflect a change in the registered office address, I sen notified in writing of this change. |
| By: χ | mace Loty by | 11/06/2019 |
| Sig | mature of Registered Agant | Date |
| If signing on be | chalf of an entity: | |
| Grace E. Kirby | , Asst. Vice President | |
| | yped or Printed Name | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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