

NO800000406
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TRC PIPELINE SERVICES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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Please honor original date 12/16/2020

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December 17, 2020

FLORIDA DEPARTMENT OF STATE
Division of CorporationsTRC PIPELINE SERVICES, LLC
4400 POST OAK PARKWAY, SUITE 1000
HOUSTON, TX 77027SUBJECT: TRC PIPELINE SERVICES, LLC
REF: M08000000406

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The Jurisdiction we have on file is Delaware and you listed Oklahoma please make correction

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott
Document Specialist IIFAX Aud. #: H20000429425
Letter Number: 620A00025567

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: TRC Pipeline Services, LLC

Enter new principal office address, if applicable: 2087 EAST 71ST STREET
TULSA, OK 74136
(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 21 GRIFFIN ROAD NORTH
WINDSOR, CT 06095
(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: 108000000-106
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 01/25/2008

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "LLC," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **Florida** _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. 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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

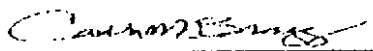
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

Add Michael A Camilly as Manager, remove Edward J Weigle as Manager and add James Mayer as Manager

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Surveyor Manager	Michael A Camilly	2200 Liberty Avenue, Suite 100	<input checked="" type="checkbox"/> Add
		Pittsburgh, PA 15222	<input type="checkbox"/> Remove
Manager	Edward J. Weigle	2087 East 71st. Street	<input type="checkbox"/> Add
		Tulsa, OK 74136	<input checked="" type="checkbox"/> Remove
Manager	James Mayer	7131 Fairway Drive, Suite 202	<input checked="" type="checkbox"/> Add
		Palm Beach Gardens, FL 33418	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Catherine M. Bragg, Manager

Typed or printed name of signee

Filing Fee: \$25.00