M11000002543

(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:





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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MILLER PIPELINE, LLC			
Name of Foreig	gn Limited Liab	ility Comp	pany
Dear Sir or Madam:			
The enclosed application, certificate and fee(s)	are submitted f	for filing.	
Please return all correspondence concerning th	is matter to the	following:	
MOHAMED YOUSIF			
Name of Person		•	
MILLER PIPELINE LLC			
Firm/Company		-	
8850 CRAWFORDSVILLE ROAD			
Address	-	•	
INDIANAPOLIS, IN 46234			
City/State and Zip Cod	e	•	
MOHAMED.YOUSIF@MILLERPIPELINE.COM			
E-mail address: (to be used for future annua	l report notificat	tion)	
For further information concerning this matter.	, please call:		
MOHAMED YOUSIF	_ at (653-5254	
Name of Person	Area Code	& Daytim	e Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of The Central 2415 N. M.	on Section of Corporations re of Tallahassee Monroe Street, Suite 810 ee, FL 32303
Enclosed is a check for the following \$25 Filing Fee \$\Bigcup \$30 Filing Fee & Certificate of Status	amount: S55 Filing Certified C		□ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

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

SECTION	ST (1-4 must be completed) rs on the records of the Florida Department of			
Name of limited liability Company as it appear State: MILLER PIPELINE, LLC	(3) (5)			
Enter new principal office address, if applicable:	8850 CRAWFORDSVILLE ROAD INDIANAPOLIS. IN 46234			
(<u>Principal office address</u> MUST BE A STREET ADDRESS)	INDIANAPOLIS. IN 46234			
Enter new mailing address, if applicable:	3100 INTERSTATE NORTH CIRCLE			
(<u>Mailing address</u> MAY BE A POST OFFICE BOX)	SUITE 300			
	ATLANTA, GA 30339			
2. The Florida document number of this limited lia	ability company is: M11000002543			
3. Jurisdiction of its organization: Indiana				
4. Date authorized to do business in Florida: 5/18	/2011			
SECTION II (5-9 complete only the applicable	changes)			
5. New name of the limited liability company:(mus	st contain "Limited Liability Company, " "L.L.C.," or "LLC.")			
If name unavailable, enter alternate name adopted copy of the written consent of the managers or mamust contain "Limited Liability Company," "L.L.	I for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate nan C." or "LLC.")			
6. If amending the registered agent and/or register registered agent and/or the new registered office a	ed officer address on our records, enter the name of the new ddress here:			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida Street Address			
	, Florida			

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

Thereby 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.

I. If the amend	ment changes person, title or capacity in	accordance with 605.0902 (1)(e), indicate tha	t change:
"itle/ Capacity	<u>Name</u>	Address	Type of Action
CEO	DALE ANDERSON	8850 CRAWFORDSVILLE ROAD	= Add
		INDIANAPOLIS, IN 46234	□Remov
′P	CHRIS SCHULER	-	= Add
		8850 CRAWFORDSVILLE ROAD	□Remov
P	CHAD DAVIS	INDIANAPOLIS, IN 46234	≅Add
			□Remov
p	DAVE TUCKER	8850 CRAWFORDSVILLE ROAD	= Add
		INDIANAPOLIS, IN 46234	□Remov
P	DAN SHORT	8850 CRAWFORDSVILLE ROAD	= Add
		INDIANAPOLIS, IN 46234	□Remov
aforemention	certificate, if required: no more than 90 and amendment(s), duly authenticated by inder the law of which this entity is orga	the official having custody of records in the	₹ ~

Typed or printed name of signee

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SECRETARY'S CERTIFICATE

OF

MILLER PIPELINE, LLC

February 4, 2021

I, the undersigned, Chief Legal Officer and Secretary of Miller Pipeline, LLC, a limited liability company organized and existing under the laws of the State of Indiana (the "Company"), do hereby certify, solely in my capacity as an officer of the Company that I am authorized to execute and deliver this Certificate on behalf of the Company and not in my individual capacity.

Under such authority, I do hereby certify that the following individuals are authorized by Company to make, execute, endorse and deliver in the name of and on behalf of the Company, but shall not be limited to, any and all written instruments, agreements, documents, execution of deeds, powers of attorney, transfers, assignments, contracts, obligations, certificates and other instruments of whatever nature to carry out all actions without limitations which may be deemed necessary to carry out the Company's business:

Dale Anderson Frank Bracht Chad Davis Justin Sanchez Josh Sargent Chris Schuler Dan Short Dave Tucker Jim Wilson

IN WITNESS WHEREOF, I have hereunto set my hand as of the date first set forth above.

D.,,

Name: W. Thomas Newell

Title: Chief Legal Officer & Secretary