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To:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUFKIN INDUSTRIES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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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)

 Name of limited liability Company as it appears on the records of the Florida Department 	of	
State: Lufkin Industries, LLC	-	
Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	•	
Enter new mailing address, if applicable: (Malling address		
MAY BE A POST OFFICE BOX)		
	F. 62	3
2. The Florida document number of this limited liability company is: M14000000482		AON USUS
3. Jurisdiction of its organization: Texas		<u>ل</u> س
4. Date authorized to do business in Florida: 01/24/2014 /:		=
SECTION II (5-9 complete only the applicable changes)		0.
5. New name of the limited liability company: Lufkin Gears LLC		
(must contain "Limited Liability Company." "L	.L.Ç.," or "LLC")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in F copy of the written consent of the managers or managing members adopting the alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")	lorida and attach a e. The alternate name	<i>:</i>
 If amending the registered agent and/or registered officer address on our records, enter the registered agent and/or the new registered office address here: 	iame of the new	
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida Street Add	ress	
, Florida	1	
Спу	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 the provisions of all statutes relative to the proper and complete performance of my duties, and accept the obligations of my position as registered agent as provided for in Chapter 605, I locument is being filed to merely reflect a change in the registered office address, I hereby co- iability company has been notified in writing of this change.	d I am familiar with . F.S. Or, if this	
If Changing Registered Agent Signature of New	Registered Apont	

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:				
Fitle/ Capacity	<u>Name</u>	Address	Type of Action	
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aforementioned ame	ente, if required: no more than 90 day eximent(s), duly authenticated by the e law of which this entity is organize	official having custody of records in the	;	
	Signature of the	authorized representative		
	Signature of the Susan Diane Koontz	authorized representative		

Filing Fee: \$25.00

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Ruth R. Hughs Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on October 05, 2020, Lufkin Industries, LLC, a Domestic Limited Liability Company (LLC) (file number 801840255), changed its name to Lufkin Gears LLC.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 26, 2020.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State

ax: (512) 463-57 TID: 10254 Dial: 7-1-1 for Relay Services Document: 1004000450003