

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855) 498-5500 Fax Number : (800) 432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NALCO ENVIRONMENTAL SOLUTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

JUL 2 4 2019

A. LUNT

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

SECTION 1 (1-4 must be completed)

Name of limited liability Company as it appears State: NALCO ENVIRONMENTAL		epartment of	
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited lial	hility company is. M140000	07223	
3. Jurisdiction of its organization: DELAWAR		23 	
4. Date authorized to do business in Florida: 10/	07/2014	<u> </u>	
SECTION II (5-9 complete only the applicable of New pame of the limited liability company:			
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging members adopting the alt	usiness in Florida and attach a emate name. The alternate name	
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	ed officer address on our records idress here:	, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	C	- Co	
	Enter Florida Street Address		
	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ager the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capac and complete performance of m ered agent as provided for in Ci in the registered office address,	ity. I further agree to comply with y duties, and I am familiar with tapter 605, F.S. Or, if this	
——————————————————————————————————————	hanging Registered Agent, Sign	ature of New Registered Agent	

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
itle/ Capacity	Name	Address	Type of Action		
			Add		
			Remove		
		**************************************	Add		
			Remove		
			23 Add		
,			Remove		
			Add		
			Remove		
			A dd		
			Remove		
aforementioned am	icate, if required: no more than 9 tendment(s), cally authenticated to the law of which this entity is ore	by the official having custody of records in the	ec		
		of the authorized representative			

Filing Fee: \$25.00

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "NALCO ENVIRONMENTAL SOLUTIONS LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "COREXIT ENVIRONMENTAL SOLUTIONS LLC" ON THE SECOND DAY OF JULY, A.D. 2019, AT 6:52 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COREXIT ENVIRONMENTAL SOLUTIONS LLC" WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2010.

4906483 8320 SR# 20196095853

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203267369 Date: 07-23-19