

M15 000 000 0892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

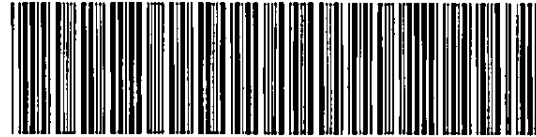
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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MAR 13 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TransMontaigne Product Services LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laurel Harwood

Name of Person

Pilot Travel Centers LLC

Firm/Company

6100 W. Plano Parkway, Suite 1600

Address

Plano, Texas, 75093

City/State and Zip Code

laurel.harwood@pilottravelcenters.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurel Harwood

at (865) 474-4487

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☒ \$60 Filing Fee, Certificate of Status & Certified Copy

**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: TransMontaigne Product Services LLC

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 liability company is: M15000000892

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 02/03/2015

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

5. New name of the limited liability company: Saratoga RP East LLC
(must contain "Limited Liability Company," "L.L.C." 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," "L.L.C." 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:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<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

Timothy C. Langenkamp

Typed or printed name of signee

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 THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "TRANSMONTAIGNE PRODUCT SERVICES LLC", CHANGING ITS NAME FROM "TRANSMONTAIGNE PRODUCT SERVICES LLC" TO "SARATOGA RP EAST LLC", FILED IN THIS OFFICE ON THE SIXTH DAY OF JANUARY, A.D. 2020, AT 6:17 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF MARCH, A.D. 2020.



2956958 8100
SR# 20200094841

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202137682
Date: 01-07-20

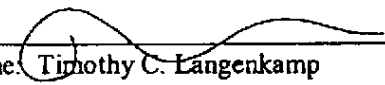
State of Delaware
Secretary of State
Division of Corporations
Delivered 06:17 PM 01/06/2020
FILED 06:17 PM 01/06/2020
SR 20200094841 - File Number 2956958

CERTIFICATE OF AMENDMENT
OF
TRANSMONTAIGNE PRODUCT SERVICES LLC

TransMontaigne Product Services LLC, a limited liability company formed and existing under the laws of the State of Delaware (the "Company"), hereby certifies as follows:

1. The name of the Company is TransMontaigne Product Services LLC.
2. The original Certificate of Formation of the Company was filed with the Secretary of State of the State of Delaware on December 30, 2014 (the "Certificate").
3. Section I of the Certificate is hereby amended to read in its entirety as follows:
"1. Name. The name of the limited liability company is Saratoga RP East LLC."
4. This Certificate of Amendment will become effective on March 1, 2020.

IN WITNESS WHEREOF, the undersigned, being an authorized person, has executed this Certificate of Amendment this 6th day of January, 2020.

By: 
Name: Timothy C. Langenkamp
Title: Assistant Secretary



Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF CORRECTION OF "TRANSMONTAIGNE
PRODUCT SERVICES LLC", CHANGING ITS NAME FROM "TRANSMONTAIGNE
PRODUCT SERVICES LLC" TO "SARATOGA RP EAST LLC", FILED IN THIS
OFFICE ON THE TWELFTH DAY OF FEBRUARY, A.D. 2020, AT 12:09
O'CLOCK P.M.



2956958 8100
SR# 20201032598

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202380619
Date: 02-13-20

**State of Delaware
Certificate of Correction
of a Limited Liability Company
to be filed pursuant to Section 18-211(a)**

1. The name of the Limited Liability Company is: TransMontaigne Product Services LLC.
2. That a Certificate of Amendment was filed by the Secretary of State of Delaware on 01/06/2020, and that said Certificate requires correction as permitted by Section 18-211 of the Limited Liability Company Act.
3. The inaccuracy or defect of said Certificate is: (must give specific reason)

The effective date specified in the Amendment is incorrect.
4. The Certificate is hereby corrected to read as follows:

This Certificate of Amendment will become effective on January 29, 2020.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on
the 12th day of February, A.D. 2020.

By: Amberly Sheppard
Authorized Person

Name: Amberly Sheppard
Print or Type

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SARATOGA RP EAST LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SARATOGA RP EAST LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



2956958 8300

SR# 20201086318

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202381566

Date: 02-13-20