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	PIRESTABLE	<b>BUSINESS</b>	DEDADT	/IIDD
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	MENT# M	9900000081	7			FILED		υ <sub>1</sub>
1. Entity Name TEXACO GLOBAL PRODUCTS LLC				·	DIVIS	FILED CRETARY OF STATE SION OF CORPORATIONS		Ą
,					i	JUL -3 PM 1:29		, •
Principal Place of Business Mailing Address					00		_	
			111 BAGBY STREET			- N		
HOUSTON TX	77002	HOUSTON TX 770	U2-2001			. 1983 F 811 118 1811	ATOL <b>ARIN</b> O 2010 (2011 (400)	<b>a</b> j
2. Principal Place of Business 3. 1		3. Mailing Address	Mailing Address		•	i 186100tt lin 10tto istr built nout vallt dett dett	)    <b>         </b>	)I
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.			DO NOT WRITE IN THIS S	PACE	
City & State		City & State	City & State		4. FEIN	76-05/12481	Applied For Not Applicab	ole
Zip	Country	Zip	Coun	ntry	5. Certi		\$5.00 Additional Fee Required	
	6. Name and Address of	f Current Registered Agent			7. Nam	e and Address of New Registered A	gent	$\exists$
CODDOD	ATION CEDIACE COMPAN	ıv ′		Name				_
	ation service compan 's street	11		Street Addres	s (P.O. Box N	(umber is Not Acceptable)		
	SSEE FL 32301-2525				9000032390297			
				City		-05/04/00- <b>F1</b> 1	014P-C6982	
8. The above	named entity submits this sta	atement for the purpose of chan	ging its register	ed office or regis	tered agent,	***1500 00 or both, in the State of Florida.	<del> \$***50,00</del>	$\neg$
						•		}
SIGNATURE .	Signature, typed or printed name of reg	istered agent and title if applicable.	(NOTE: Registere	ed Agent signature requ	ired when reinstat	ing) DATE		_
			EE-NOW!!!	FEE-IS-\$50.0	0		<del></del>	
		Make Che	ck Payable t	o Departmen	t of State			
9.	MANAGIN	I I I I I I I I I I I I I I I I I I I	10.			ADDITIONS/CHANGES		ᅴᇎ
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CITY- 8T-ZIP	and the state of t	ما المالية المالية المالية المالية		r-81-ZIP	Continu 110	07/3)(i) Florida Statutas I further con	ify that the information	
indicated	on this report is true and acc	oplied with this filing does not quourate and that my signature sha for trustee empowered to exect	ıll have the sam	e legal effect as	if made unde	07(3)(i), Florida Statutes. I further cert or oath; that I am a managing membe orida Statutes.	r or manager of the	` <b>}</b>
		d			E	,	140 1 5 ~	
SIGNAT	URE:	ANADORE RE	QUIRE			4/15/00 (713)	152-66:1-	$ \mathcal{I} $
	SIGNATURE AND TY	PED OR PRINTED NAME OF SIGNING MA	ANAGING MEMBER	OR MANAGER		· / Date _ / Da	ytime Phone #	