2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2012
Secretary of State

DOCUMENT# P25745

Entity Name: VALVOLINE INSTANT OIL CHANGE FRANCHISING, INC.

Current Principal Place of Business:

50 E. RIVER CENTER BLVD.
COVINGTON, KY 410120391

New Principal Place of Business:

Current Mailing Address:

3499 BLAZER PWKY
ATTN: STATE TAX DEPT
LEXINGTON, KY 40509

New Mailing Address:

FEI Number: 61-1143350 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 333242525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PR.D
Name: PUCKETT, ANTHONY R
Address: 3499 BLAZER PARKWAY
City-St-Zip: LEXINGTON, KY 40509

Title: SC.D
Name: HARALDSON, JOHN G
Address: 3499 BLAZER PARKWAY
City-St-Zip: LEXINGTON, KY 40509

Title: TRES
Name: FREEMAN, LYNN P
Address: 50 E RIVERCENTER BLVD
City-St-Zip: COVINGTON, KY 41012

Title: VP/D
Name: MCKEOWN, MATTHEW P
Address: 3499 BLAZER PARKWAYT
City-St-Zip: LEXINGTON, KY 40509

Title: ASAT
Name: GREGG, SCOTT A
Address: 50 E. RIVERCENTER BLVD
City-St-Zip: COVINGTON, KY 41012

Title: ASEC
Name: EVANS, KAREN L
Address: 3499 BLAZER PARKWAY
City-St-Zip: LEXINGTON, KY 40509

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN L. EVANS ASEC 03/12/2012

Electronic Signature of Signing Officer or Director — Date