P9600000992

(Red	questor's Name)				
(Add	dress)				
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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Special Instructions to Filing Officer:					
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	12/19/2024	
Name:	Cheyanne Davis	
Reference #	2559492	_
Entity Name	TAW TECHNICAL	FIELD SERVICES, INC.
Article	es of Incorporation/Authorization	to Transact Business
☐ Amer	ndment	
✓ Chan	ge of Agent	
☐ Reins	statement	
☐ Conv	ersion	
☐ Merg	er	
☐ Disso	olution/Withdrawal	
Fictiti	ous Name	
Other	r	
Authorized A	Amount: \$35	
Signature:	() huma Paine	

F: 800.944.6607

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	•		507,1508, or 617,1508, F A under the laws of the S				
-	•	• •	l agent, or both, in the S	• — — — — —			
1. The name of t	he corporation:	TAW TECHNICAL FIELD SERVICES, INC.					
	office address:	250 Evacutive Center Drive, Suite 201					
		Greenville, SC 29615					
3. The mailing a	ddress (if different): 250 Executive Center Drive, Suite 201, Greenville, SC 29615						
4. Date of incorp	oration/qualification:	alification: 1/2/1996 Document number: P96000001992					
	street address of the c tment of State: (If resi		it and registered office or	on file with the			
	COF	RPORATION SERVI	CE COMPANY				
		1201 HAYS	ST				
		TALLAHASSEE, F	L 32301				
6. The name and (if changed):	street address of the r	ew registered agent (if changed) and /or regist				
		Cogency Globa	il Inc.	202 ¹ SI TAI			
	1	15 North Calhoun St	reet, Suite 4	2024 DEC 20 SECREASS TALLAHASS			
) l'acceptable	70 100 100 100 100 100 100 100 100 100 1			
		Tallahassee, Florid	a 32301	—— <u> </u>			
The street addre as changed will	ss of its registered off be identical.	ice and the street add	lress of the business off	fice of its registered agent			
Such change wa authorized by th	is authorized by resolute board, or the corpor	ition duly adopted by ation has been notifi	tits board of directors o ed in writing of the chai	or by an officer so hange.			
/s/ Wesley Paul			Wesley Paul, VP, Corporate Controller				
	e of an officer or director		Printed or typed in				
I hereby accept I further agree t of my duties, an document is bein corporation has	ine appointment as re o comply with the pro d I am familiar with a ng filed merely to refl been notified in writi	gistered agent and a wisions of all statute, wid accept the obliga ect a change in the ra ng of this change.	relative to the proper of the first to the proper of the first position as registered office address,	wity. and complete performance egistered agent. Or, if th s, I hereby confirm that th			
/s/ Michael Carlisle			Nov. 21, 2024				
Sign	nature of Registered Agent		Date				
If signing on bel	half of an entity:						
Michael C	artisle, Assistant Sec	retary					
Ту	ped or Printed Name						
		* * * FILING FEE:	\$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)