

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000004658

Entity Name: HEPACO, LLC

Current Principal Place of Business:

9335 HARRIS CORNERS PARKWAY
SUITE 220
CHARLOTTE, NC 28269

Current Mailing Address:

9335 HARRIS CORNERS PARKWAY
SUITE 220
CHARLOTTE, NC 28269 US

FEI Number: 56-1428449

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 US

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

Authorized Person(s) Detail :

Title MEMBER
Name HEPACO HOLDING, LLC
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title CFO
Name DUFFELL, CHRIS
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title SENIOR VICE PRESIDENT, CEO
Name SCHRECK, ROBERT R.
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title ASSISTANT SECRETARY /
CONTROLLER
Name ARCHER, CHELSEA
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title VICE PRESIDENT AND ASSISTANT
SECRETARY
Name EARLS, ALEX
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title VICE PRESIDENT AND SECRETARY
Name PETROCELLI, PHIL
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title CHIEF HUMAN RESOURCES OFFICER
Name INGERSOLL, SHAYNE
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

Title CHIEF COMMERCIAL OFFICER
Name KNIBBS, KEN
Address 9335 HARRIS CORNERS PARKWAY
SUITE 220
City-State-Zip: CHARLOTTE NC 28269

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHELSEA ARCHER

**ASSISTANT SECRETARY / 04/14/2023
CONTROLLER**

Electronic Signature of Signing Authorized Person(s) Detail

Date