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Statement of Change Changing the Registered Agent Information 8 7-90-305 5 and 8 7-90-702 of the Colorado Revised Statutes (C.R.S.)

Entity ID number	20161072926			
	(Colorado Secretary of State ID number)			
Entity name or True name	Teton Petroleum T	ransport, LLC		
2. (If applicable, adopt the following statement by m The registered agent name has cha		ages.)		
Such name, as changed, is				
Name (if an individual)			(16:111.)	
or	(Last)	(First)	(Middle)	(Suffix)
(if an entity) (Caution: Do not provide both an individual of the following statement is adopted by marking the statement is adopted by marking the statement as registered. 3. (If applicable, adopt the following statement by marking the statemen	the box.) ed agent has consented to arking the box and enter all char	being so appointed	1.	
Street address	1900 W. Littleton Boulevard			
	(Street number and name)			
	Littleton	СО	80120	
	(City)	(State)	(ZIP Code)	
Mailing address (leave blank if same as street address)	(Street number and name or Post Office Box information)			

4. (If applicable, adopt the following statement by	marking the box.)				
The person appointed as registered	ed agent has delivered not	ice of the change to	the entity.		
5. (If applicable, adopt the following statement by This document contains addition					
6. (Caution: Leave blank if the document doe legal consequences. Read instructions bef		date. Stating a delaye	ed effective date has	significant	
(If the following statement applies, adopt the sta The delayed effective date and, if ap			e required format.)		
		(mm	n/dd/yyyy hour:minute d	am/pm)	
acknowledgment of each individual causuch individual's act and deed, or that so of the person on whose behalf such indiconformity with the requirements of padocuments and the organic statutes, and document are true and such document cand the organic statutes. This perjury notice applies to each indistate, whether or not such individual is 7. The true name and mailing address of	uch individual in good fait ividual is causing such do rt 3 of article 90 of title 7, d that such individual in go complies with the requiren vidual who causes this doc identified in this documer	th believes such do cument to be delive C.R.S. and, if appl ood faith believes the theoretical to be delived that Part, the cument to be delived at as one who has contact the cument to be delived that the cument that the cument that the cument the cument that the cument that the cument the cument the cument that the cument that the cument the cument that the cument that the cument the cument that the cument the cument that the cument that the cument that the cument the cument that	cument is the act ered for filing, tak licable, the consti- he facts stated in he constituent doc- ered to the Secreta aused it to be del	and deed ken in tuent such cuments, ary of ivered.	
-	Hall	Cole			
	PO Box 50620	(First)	(Middle)	(Suffix)	
	(Street number and name or Post Office Box information)				
	Idaho Falls	ID	83405		
	(City)	(State) United S	(ZIP/Postal C	Code)	
	(Province – if applicab	le) (Countr			
(If applicable, adopt the following statem This document contains the true causing the document to be del	e name and mailing addres		dditional individu	als	
Disclaimer:	• , ,• ,• ,• ,• ,• ,• ,• ,• ,• ,• ,• ,•			1 •	

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