



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Application for Certificate of Withdrawal FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-1.2-1412 and 7-1.2-1413, the undersigned corporation hereby applies for a Certificate of Withdrawal from the State of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number: 000024829	2. The name of the corporation is: Sun Oil Company
3. It is incorporated under the laws of: Delaware	
4. The corporation is not transacting business in this state and surrenders its authority to transact business in this state.	
5. It revokes the authority of its registered agent in this state to accept service of process, and consents that service of process in any action, suit, or proceeding based upon any cause of action arising in this state during the time the corporation was authorized to transact business in this state may subsequently be made on the corporation by service thereof on the Department of State of the State of Rhode Island.	
6. The post office address to which the Department of State may mail a copy of any service of process against the corporation that is served on the Department of State: 8111 Westchester Drive, Suite 600, Dallas, TX 75225	
7. The corporation certifies that it has no outstanding tax obligations. As required by RIGL § 7-1.2-1413, the corporation has paid all fees and taxes. [Note: Tax status can be verified at taxportal.ri.gov .]	
8. If the corporation is in the hands of a receiver or trustee, this Application for Certificate of Withdrawal must be executed on behalf of the corporation by the receiver or trustee.	
9. Date when this certificate of withdrawal will be effective: CHECK ONE BOX ONLY	
☒ Date received (Upon filing) ☐ Later effective date (Date must be no more than 90 days from the date of filing) _____	
Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Withdrawal, including any accompanying attachments, and that all statements contained herein are true and correct.	
Type or Print Name of Authorized Officer Peggy J. Harrison	Date 2/25/2021
Signature of Authorized Officer of the Corporation <i>Peggy J. Harrison</i>	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

MAR 02 2021

If you have any questions, please call us at (401) 222-3040, Monday through Friday between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 154 Revised 06/2020

2021 MAR - 2 PM 12:11

RI DEPT. OF STATE
BUS. SVCS. DIV.

W3BNA
AA 12:11 PM



STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

SUN OIL COMPANY
ATTN: EDWARD HALLGREN
800 E SONTERRA BLVD
SAN ANTONIO, TX 78258-3940

I.D.# 24829

LETTER OF GOOD STANDING

It appears from our records that SUN OIL COMPANY has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. SUN OIL COMPANY is in good standing with the Rhode Island Division of Taxation as of 02/17/2021. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit. _____

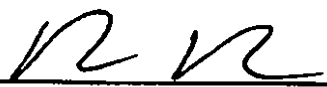
This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above named corporation for the purpose of:

WITHDRAWAL FOR SECRETARY OF STATE

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,


DANNY PACHECO
Supervising Revenue Officer


Neena Savage
Tax Administrator

231868237:16753543
DLN: 10009845588



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

March 02, 2021 12:11 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

