

State of Rhode Island Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Certificate Request Form

Request Information

ID	ENTITY NAME	CERTIFICATE TYPE
001669198	Sunoco GP LLC	Certificate of Good Standing

Filer's Contact Information

(Enter a contact name, mailing address and email.)

 $\begin{array}{ll} \text{Contact Name: } \underline{CSC} \\ \text{Business Name: } \underline{CSC} \end{array}$

No. and Street: 2711 Centerville Rd

<u>Suite 400</u>

City or Town: WILMINGTON State: DE Zip: 19808 Country: USA

Contact Phone: ext:

 ${\tt Contact\ Email:}\ \underline{DRFULFILLMENT@CSCGLOBAL.COM}$

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