

State of Indiana
Office of the Secretary of State

Certificate of Amendment
of
CO-ALLIANCE COOPERATIVE, INC.

I, DIEGO MORALES, Secretary of State, hereby certify that Articles of Amendment of the above Domestic Agricultural Coop have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

The name following said transaction will be:

KEYSTONE COOPERATIVE, INC.

NOW, THEREFORE, with this document I certify that said transaction will become effective Friday, March 01, 2024.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 06, 2023

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

2002123100208 / 10126986

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>

FACILITY ID #		TRANSACTION ID - FOR STATE USE ONLY		
UST OWNER CERTIFICATION				
<p>I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10 and IC 13-23-14-2, that the statements and representations in this document are true, accurate, and complete. I further certify compliance with the following requirements in accordance with 329 IAC 9-2-2(e):</p> <p>(1) Installation of all tanks and piping under 40 CFR 280.20.</p> <p>(2) Cathodic protection of steel tanks and piping under 40 CFR 280.20.</p> <p>(3) Release detection under 40 CFR 280 Subpart D.</p> <p>(4) Financial responsibility under 329 IAC 9-8.</p>				
OWNER'S AUTHORIZED REPRESENTATIVE (Print or Type)				
PREFIX	FIRST NAME	MI	LAST NAME	SUFFIX
	Mark		Ransom	
TITLE OF AUTHORIZED REPRESENTATIVE		COMPANY NAME (If Individual Leave Blank)		
Retail Manager		Keystone Cooperative, Inc		
SIGNATURE				DATE (MM/DD/YYYY)
				05/20/2024
UST OPERATOR CERTIFICATION				
<p>I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10 and IC 13-23-14-2, that the statements and representations in this document are true, accurate, and complete. I further certify compliance with the following requirements in accordance with 329 IAC 9-2-2(e):</p> <p>(1) Installation of all tanks and piping under 40 CFR 280.20.</p> <p>(2) Cathodic protection of steel tanks and piping under 40 CFR 280.20.</p> <p>(3) Release detection under 40 CFR 280 Subpart D.</p> <p>(4) Financial responsibility under 329 IAC 9-8.</p>				
OPERATOR'S AUTHORIZED REPRESENTATIVE (Print or Type)				
PREFIX	FIRST NAME	MI	LAST NAME	SUFFIX
	Mark		Ransom	
TITLE OF AUTHORIZED REPRESENTATIVE		COMPANY NAME (If Individual Leave Blank)		
Retail Manager		Keystone Cooperative, Inc		
SIGNATURE				DATE (MM/DD/YYYY)
				05/20/2024
CONTRACTOR CERTIFICATION				
CERTIFIED INDIVIDUAL NAME				
PREFIX	FIRST NAME	MI	LAST NAME	SUFFIX
OATH: I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10 and IC 13-23-14-2, that work performed on the UST system complies with methods specified in 329 IAC 9 and 40 CFR 280, Subpart C.				
SIGNATURE		EMAIL ADDRESS		DATE (MM/DD/YYYY)
		mark.ransom@keystonecoop.com		05/20/2024

Stewart, Angela

Subject: RE: Name Change list

Response to 6-12-24 NF submittals

From: Megan Cabaniss <Megan.Cabaniss@keystonecoop.com>

Sent: Monday, June 24, 2024 1:36 PM

To: STEIFF, ROBERTA <RSTEIFF@idem.IN.gov>

Subject: Name Change list

Bobbi,

Please find attached our list of locations for name changes. We've included the Cert. of Mergers, Insurance, and also the last page of the 45223(signed). I believe we've included all the necessary information, but please let me know if we've missed anything.

Have a great week!

Thanks,

Megan



Megan Cabaniss

Administrative Assistant

Phone: 317-218-4717

Keystone Cooperative, Inc.

770 N High School Rd, Indianapolis, IN 46214-3756

Megan.Cabaniss@keystonecoop.com | www.keystonecoop.com



Co-Alliance and Ceres have merged to form Keystone Cooperative effective March 1, 2024.

Please note a change in email address.

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