

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000006994

**FILED**  
**Apr 14, 2017**  
**Secretary of State**  
**CC8910207341**

**Entity Name:** RIVERSTONE OPERATING COMPANY, INC.

**Current Principal Place of Business:**

18 BROAD STREET, SUITE 300  
CHARLESTON, SC 29401

**Current Mailing Address:**

18 BROAD STREET, SUITE 300  
CHARLESTON, SC 29401 US

**FEI Number:** 20-3768225

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title SECRETARY  
Name NEWELL, CATHERINE  
Address 18 BROAD STREET, SUITE 300  
City-State-Zip: CHARLESTON SC 29401

Title CEO, PRESIDENT  
Name LIVINGSTONE, ANDREW  
Address 18 BROAD STREET, SUITE 300  
City-State-Zip: CHARLESTON SC 29401

Title VP, ASSISTANT SECRETARY,  
TREASURER  
Name FLETCHER, EDDIE  
Address 18 BROAD STREET, SUITE 300  
City-State-Zip: CHARLESTON SC 29401

Title DIRECTOR  
Name RAMSEY, J. DEREK  
Address 18 BROAD STREET, SUITE 300  
City-State-Zip: CHARLESTON SC 29401

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CATHERINE NEWELL

**SECRETARY**

**04/14/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date