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Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LP/LLLP
FrancieCo, L.P.

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A. LUNT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Francieco, LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

Linda Withner

Contact Person

Love's Travel Stops & Country Stores, Inc.

Firm/Company

10601 N. Pennsylvania Ave.

Address

Oklahoma City, OK 73120

City, State and Zip Code

linda.withner@loves.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Withner

at (405) 242-2535

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUN -4 AM 11:06

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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. Francieco, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Oklahoma State or Country of Formation 3. 8/3/98 Date of Formation

4. Federal Employer Identification Number: 73-1549760

5. Name of Registered Agent for Service of Process and Florida Street Address:

C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Connie Bryan Assistant Secretary Signature of Registered Agent

7. Principal Office: 10601 N. Pennsylvania Ave. Oklahoma City, OK 73120

8. Mailing Address: PO Box 26210 Oklahoma City, OK 73126

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9. If limited partnership is a limited liability limited partnership, check box.

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: TJL Management Company, Inc. Name of General Partner: Street Address: 10601 N. Pennsylvania Ave. Street Address: Mailing Address: PO Box 26210 Mailing Address: Oklahoma City, OK 73126

Page 1 of 2

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 3rd day of June, 2013

[Handwritten signature]

Signature of a general partner
Doug Stussl, VP, TIL Management Co, Inc.

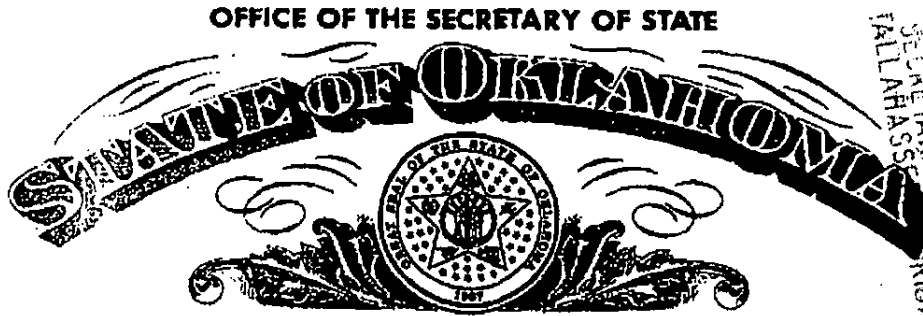
The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Page 2 of 2

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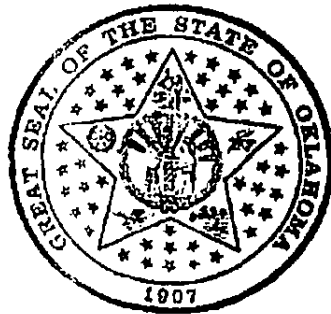
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**CERTIFICATE OF GOOD STANDING
 DOMESTIC LIMITED PARTNERSHIP**

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that FRANCIECO, L. P. whose registered agent is DOUGLAS J. STUSSI, with its registered office at 10601 N PENNSYLVANIA AVE OKLAHOMA CITY 73120 USA Oklahoma is a Domestic Limited Partnership duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 3rd, day of June, 2013.

Harry V. Parnell

Secretary Of State