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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)205-8842

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company AROC SERVICES GP LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help JUL 1 3 2015

J SHIVERS

COVER LETTER

SUBJECT:	AROC SERVICES	GP LLC	ed Lisbilly Company		
			• • •		
The enclosed Existence, an	l "Application by Po id check are submitte	reign Limited Liability Con ed to register the above refe	tpany for Authorizat renced foreign limite	ion to Tran ed Hability	sact Business in Florida," Certificat company to transact business in Flo
		concerning this matter to the		•	
	Dave Korn		-		
	Dave Roll		iame of Person		
	CT				
		F	lim/Company	<u>.</u> .	
	1021 Main St.,	Ste. I 150			•
			Address		
	Houston, TX, 7	7002			
			State and Zip Code		
		E-mail address: (10 be use	v las liduse annual sea	जन वर्त्यातिका	
For further in	formation concernic	ig this matter, please call:	o to lorare muitai leb	iner itmenisti	ion
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MA	ILING ADDRESS	STRE	ET ADDRESS: on of Corporations		
DIVI Reg	ision of Corporation istration		ation Section		
	Box 6327	Clifton	Building		
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		following amount:	M the no pit	Rea &	CI 6140 00 Ciling For Comificate
F1 2	125.00 Filing Fee	Certificate of Status	四\$155.00 Filing Certified Cop		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company." "L.L.C."	or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate t Liability Company," "L.L.C," or "LLC.")	nume must include "Limited
2. Delaware 3.	
(Jurisdiction under the law of which foreign limited liability (FE) number, if appli company is organized)	cable)
	A≤
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 16666 Northchase Dr.	Some Some
Houston, TX - 77060	四个 []
(Street Address of Principal Office)	Transfer of the state of the st
6. 16666 Northchase Dr.	
Housian, TX - 77060	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to n	nanage is/are:
Kenneth R. Bickett, Manager, 16666 Northchase Dr	2., Houston, TX 77060
Greck L. Rice, Manager, 16666 Northchase De	Houston, TX 7706C
Donald C. Wayne, Manager, 16666 Northdrase De	Houston, TX 77060
8. Attached is an original certificate of existence, no more than 90 days old, duly author having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	photocopy is not
Burundhull	
Signature of an authorized person (in accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjustent any false information submitted in a document to the Department of State constitutes a third degree felony as provi	ry that the facts stated herein are true. I ded for in s.817.155, F.S.)
Susan G. Miller Typed or printed name of signee	
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

AROC SERVICES OF LLC				
If unavailable, the	e alternate to be used in	the state of Florida is:		
2. The name and	the Florida street addre	ess of the registered agent and office are:		
•	C T Corporation System		30 35	
_		(Name)	SV HV SV JR.,	
1	200 South Pinc Island Ros	d	SS TO SAME	
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
ļ	Plantation	FL 33324	5 7. 5 T	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

C T Corporation System

By.

(Signature)

C T Corporation System

Denise Bell

Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AROC SERVICES GP LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE SEVENTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

15 JUL 10 AM 7: 51
SECRETARY OF STATE
TALLAHASSEE FLORIE

5708279 8300

151017044

You may verify this certificate online at corp. delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2531954

DATE: 07-07-15