2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000219

Entity Name: ALAMO FINANCING L.L.C.

Current Principal Place of Business:

6929 N. LAKEWOOD AVENUE, SUITE 100, MOD 1.2 202

TULSA. OK 74117-1808

Current Mailing Address:

6929 N. LAKEWOOD AVENUE, SUITE 100, MOD 1.2 202

TULSA, OK 74117-1808 US

FEI Number: 41-1930028 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

Name TAYLOR, ANDREW C. Name FIGUEROA, ORLANDO

Address 6929 N. LAKEWOOD AVENUE, SUITE Address 6929 N. LAKEWOOD AVENUE, SUITE

100, MOD 1.2 202 100, MOD 1.2 202

City-State-Zip: TULSA OK 74117-1808 City-State-Zip: TULSA OK 74117-1808

Title MANAGER Title MANAGER

Name NICHOLSON, PAMELA M. Name SHORT, RICK A.

Address 6929 N. LAKEWOOD AVENUE, SUITE Address 6929 N. LAKEWOOD AVENUE, SUITE

100, MOD 1.2 202 100, MOD 1.2 202

City-State-Zip: TULSA OK 74117-1808 City-State-Zip: TULSA OK 74117-1808

Title VP

Name WILLEY, RUSSELL A.

Address 6929 N. LAKEWOOD AVENUE, SUITE

100, MOD 1.2 202

City-State-Zip: TULSA OK 74117-1808

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RUSSELL A. WILLEY VICE PRESIDENT

04/04/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 04, 2018

Secretary of State

CC0375396241