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T. HAMPTON APR 2 5 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>National lumb</u> we (Name of Foreign Limited Partnersh	L Compressor, Ltd.
The enclosed application, certificate of sta	atus and fees are submitted to register a foreign ited partnership to transact business in Florida.
Matt Ashabranner (Contact Person) LD Services LLC (Firm/Company)	
(Contact Person)	
LD Services LLC	· · · · · · · · · · · · · · · · · · ·
(Firm/Company)	
3405 W. Cardinal Drive	/
(Address)	
3405 W. Cardinal Drive (Address) Beaument, TX 77705 (City, State and Zip Code)	
(City, State and Zip Code)	- · · · · · · · · · · · · · · · · · · ·
For further information concerning this m	atter, please call:
	-
(Name of Contact Person)	at (409) 980 - 7000 (Area Code and Daytime Telephone Number)
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	unt:
☐ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) ☐ \$1,008.75 Filing Fee and Certificate of Status	s \(\sum \) \$1,052.50 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

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

1. Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
(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
(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. Texas 3. April 18, 2007
(State or Country of Formation) (Date of Formation)
4. Jeffrey B Hayden (Name of Registered Agent for Service of Process)
(Name of Registered Agent for Service of Process)
5. 330 Winston Creek Pky Ste G Lakeland FZ 33810 (Florida street address for Registered Agent)
(Florida street address for Registered Agent)
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 an accept the obligations of my position as registered agent.
Signature of Registered Agent
7. 330 Winston Creek Pkuy SteG, Lakeland F233810 (Principal office address)
8. If limited partnership is a limited liability limited partnership, check box \Box .

Page 1 of 3

9. 330 Winston Creek Pky Stels, Lakeland R338. (Mailing address) 10. Name, principal office address, and mailing address of each general partner:		
	3405 West Cardnel Drive (Mailing Address) Beaumont, TX 77705	
(Name)	(Street Address)	
	(Mailing Address)	
(Name)	(Street Address)	
	(Mailing Address)	
(Name)	(Street Address)	
	(Mailing Address)	

Page 2 of 3

(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
11 Fff visa des if all subsets de des cf f	
11. Effective date, if other than the date of fill (Effective date cannot be prior to nor filed by the Florida Department of Sta	more than 90 days after the date this document is
to the delivery of this application to the	nce duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of of the entity's records in the jurisdiction under the
Signed this 18 th day of	APR 20 08 PR 25 FILE
Signature of a general partner:	to President, hymote investments, inc., horsel Partner of
Λ	lational Pung + Congressor, Ltd
Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

National Pump & Compressor, Ltd. Filing Number: 800803166

Certificate of Formation

April 18, 2007

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 04, 2008.



Phil Wilson Secretary of State

Pholester