

H15000193

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (850)205-8842
 Fax Number : (850)878-5368

2015 JUL 17 A 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

**FLORIDA/FOREIGN LP/LLP
QUIK-WAY RETAIL ASSOCIATES II, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,000.00

*Please file 2nd
After the GP has
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 20 2015
7/17/2015
J. BRUG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QUIK-WAY RETAIL ASSOCIATES II, LTD.

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:

Travis Booth

Contact Person

QUIK-WAY RETAIL ASSOCIATES II, LTD.

Firm/Company

8350 N. CENTRAL EXPRESSWAY, SUITE M2185

Address

DALLAS/TX/75206

City, State and Zip Code

tbooth@empirepetroleum.com

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

For further information concerning this matter, please call:

Travis Booth

at (301) 605-8021

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

2015 JUL 17 A 8:57

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

1. QUIK-WAY RETAIL ASSOCIATES II, LTD.

(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. Texas State or Country of Formation 3. 10/12/2007 Date of Formation

4. Federal Employer Identification Number: 261261885

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: C T Corporation System Signature of Registered Agent Jordan Brown, Asst. Secretary

7. Principal Office: 8350 N. CENTRAL EXPRESSWAY, SUITE M2185 DALLAS/TX/75206

8. Mailing Address: 8350 N. CENTRAL EXPRESSWAY, SUITE M2185 DALLAS/TX/75206

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: QUIK-WAY GP, LLC Name of General Partner: Street Address: 8350 N. CENTRAL EXPRESSWAY, SUITE M2185 DALLAS/TX/75206 Street Address: Mailing Address: Mailing Address: Name of General Partner: Name of General Partner: Street Address: Street Address: Mailing Address: Mailing Address:

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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 16 day of July, 20 15.

Travis Booth
Signature of a general partner

Travis Booth, Authorized Person for Quik-Way GP, LLC, GP of Quik-Way Retail Associates

The individual signing this document affirms 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, P.S.

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

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2015 JUL 17 A 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/17/2015 12:37:38 PM From: To: 8506176383(5/5)

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



Carlos H. Cascos
Secretary of State

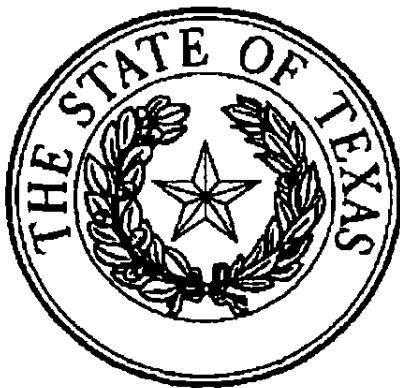
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Quik-Way Retail Associates II, Ltd. (file number 800883971), a Domestic Limited Partnership (LP), was filed in this office on October 12, 2007.

It is further certified that the entity status in Texas is in existence.

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 July 16, 2015.



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos
Secretary of State

Phone: (512) 463-3555
Prepared by: SOS-WEB

Come visit us on the internet at <http://www.sos.state.tx.us/>
Fax: (512) 463-5709
TID: 10264

Dial: 7-1-1 for Relay Services
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