Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H160000041143)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

Phone : (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:

FLORIDA/FOREIGN LP/LLLP FLASH FUEL, LP

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

January 7, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION

SUBJECT: FLASH FUELS LP

REF: W16000000783

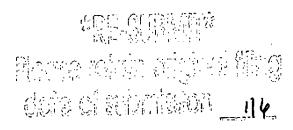
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H16000004114 Letter Number: 116A00000351





Flash Fuel, LLC Part of the CST Brands, Inc. Family of Companies

Gerard J. Sonnier, Senfor Vice President, Secretary and General Counsel E-mail: Gerard.sonnier@cstbrands.com

January 7, 2016

VIA EMAIL

Secretary of State, State of Florida

Re:

Qualification of Flash Fuel, LP

To whom it may consern:

Flash Fuel, LLC gives its consent to the use of the name Flash Fuel, LP.

Sincesely

/Gerard/J. Sonnier

Senio Vice President, Secretary and General Counsel

2016 JAN - G A 9: 5

COVER LETTER

TO;	Registration St Division of Co					
SUBJE	CT: Flash Fuel	LP				
	Na	me of Foreign Limited Part	nership or Limite	d Liability	ty Limited Partnership	
partners	ship to transact b	n, certificate of status and li usiness in Florida, ondence concerning this mi		to registe	er a foreign limited partnership or limited Hability iii	nited
Christit	na Best					
		Contact Person				
CST B	rands, Inc.					
	 "	Firm/Company		_		
One Va	lero Way, Aldg.	D, Suite 200				
		Address			,	
San Ant	ionio, Texas 782	49				
	C	ity, State and Zip Code				
	a.best@cstbrands			<u>. </u>	· .	
E-mail	address: (to be t	ised for future annual repor	t notification)			
For furth	er information c	oncerning this matter, pleas	se call:			
Christin	a Best		at (210	692-2	2541	
	Name of Contac	t Person	Ares Code	and Dayt	time Telephone Number	
Enclosed	l is a check for th	e following amount:				
(\$965 Fil	.00 Filing Fees ling Fee and istered Agent	2\$1,008.75 Filing Fees and Certificate of Status	S1,052.50 Fil and Certified Ca		.; \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status	
Registrati Division Clifton B 2661 Exe	F ADDRESS: ion Section of Corporations uilding sective Center Ci see, FL 32301	rcle	MAILING AD Registration Sec Division of Con P. O. Box 6327 Tallahassee, FL	tion porations		

, Flash Puel, LP		LIMITED LIABII TO TRANSAC Limited Partnership or Limited Liabi	REIGN LIMITED PARTNERSHIP OF LITY LIMITED PARTNERSHIP CT BUSINESS IN FLORIDA Illy Limited Partnership, which must in	ARY 6				
	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. WILP O							
	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. Delaware	itate or Country of Formation	3. December 28, 2015 Date of Forma	*for				
		•	ֆրլբ մ։ Իս լաբ	nau				
	4. Federal Employer Identification Number: 81-0973373 5. Name of Registered Agent for Service of Process and Florida Street Address: C T Corporation System							
	1200 South Pine Is	and 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. ET Corporation System By Charles Ward Hollower (1924. Be. Signature of Registered Agent)							
	7. Principal Office:		8. Mailing Address:					
	One Valero Way, Bldg. D, Suite 200		Same	_				
	San Antonio, Texas	78249						
	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: Name of General Partner:							
	Street Address:	One Valero Way, Bldg. D, Suite 200	Street Address:					
F1500000		San Antonio, Texas 78249	0,100,730,100					
	Mailing Address:	·	Mailing Address:					
	Name of General	Partner:	Name of General Partner:					
	Street Address:		Street Address:	<u> </u>				
	Mailing Address:		Mailing Address:					

	Pa	e 1 of 2	
Name of General	Partner:	_ Name of General Partner:	
Street Address:		Street Address:	·
	·	<u> </u>	
Mailing Address:		Mailing Address:	
11. Effective date, if ((Effective date cannot	other than the date of filing:be prior to nor more than 90 days after the a	ate this document is filed by the Flortd	o Department of State.)
12. Attached is a certification of the law of which it is a	State, by the Secretary of State or other officers	a than 90 days prior to the delivery of all having custody of the entity's recon	this application to the ds in the jurisdiction under
Signed this 5th	day of	20 16	
•	Sincolture of Gerund / Sonnier, SV	rgenoral partner	
The individual signing submitted in a docume	this document affirm that the fagts stated her nt to the Department of State constitutes a th	sin are true and the Individual is aware	that false information 17.155, F.S.
Filin	g Fces: \$1,0	0.00 (\$965 Filing Fee and \$35 Registe	ared Agent Fee)
Cert	ified Copy (optional): \$52.	O	
Cert	ificate of Status (optional): \$8.7		

Page 2 of 2

2016 JAN - 6 A 9:56

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FLASH FUEL, LP" 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 SIXTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5920866 8300 SR# 20160071404 Authentication: 201624445

Date: 01-06-16

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