B24000000204

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Octanica copies Certaincates or classes				
Special Instructions to Filing Officer:				





400423176164

RECEIVED

JUN 1 3 2024 K. Brumbley





To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date:_06/05/24

Order #: 1525649-1

Re: Ram Products, Ltd.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$1000 - FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

ΔΗΤΗ

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

7

TO:	Registration Section Division of Corporations	5		
	•			
SUBJ	ECT: Ram Products, Ltd.	.de		
	Name of Foreign I	imited Partnership or Lim	ited Liability Limited Partnership	
The er	nclosed application, certificate of	status and fees are submitt	ed to register a foreign limited partnersh	ip or limited liability limited
	rship to transact business in Flori			
Please	return all correspondence concer	ning this matter to:		
Core	y Russell			
	Contact Per	son		
Ram	Products, Ltd	-	•	
	Firm/Comp	any -		
PO B	ox 821159		<u>-</u>	
	Addres	<u></u> 3	·	
Fort \	Worth, TX 76182			
	City, State and Z	Lip Code		
cruss	ell@ramproducts.com			
E-m	ail address: (to be used for future	annual report notification)	
For fu	rther information concerning this	matter, please call:		
Core	y Russell	at (<u>817</u>	616-5100	
	Name of Contact Person	at (Area C	ode and Daytime Telephone Number	
Enclo	sed is a check for the following a	nount:		
(\$9	965 Filing Fee and and Cert 5 Registered Agent Status		0 Filing Fees tified Copy Certified Copy, and Certificate of Status	
	Mailing Address:		Street Address:	
Registration Section Division of Corporations P.O. Box 6327			Registration Section	
			Division of Corporations	
			The Centre of Tallahassee	

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

, Ram Products, 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.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. 3. 1/2/2002 2. Texas State or Country of Formation Date of Formation 4. Federal Employer Identification Number 75-969697 - 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 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. Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 3000 Wesley Way PO Box 821159 Richland Hills, TX 76118 Fort Worth, TX 76182 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:_ Ram Products, Co., L.L.C. ____ Name of General Partner:____ 3000 Wesley Way Street Address: ___ Street Address: __ Richland Hills, TX 76118 PO Box 821159 Mailing Address: _____ Mailing Address:____ Fort Worth, TX 76182 Name of General Partner:________Name of General Partner:_______ Street Address: Street Address:

Mailing Address:

Mailing Address:

Page 1 of 2

Name of General Partner:	Name of General F	Name of General Partner:	
Street Address:	Street Address:	Street Address:	
Mailing Address:	Mailing Address:_		
(Effective date cannot be prior to nor more Note: If the date inserted in this block does document's effective date on the Department 12. Attached is a certificate of existence duty.	y authenticated, not more than 90 days prior	filed by the Florida Department of State.) rements, this date will not be listed as the	
-	June .20 24	_	
	Signature of a general partner	GR RAM ARODAGS, CO., L.L.C.	
	ns that the facts stated herein are true and the of State constitutes a third degree felony as p		
Filing Fees:	\$1,000.00 (\$965 Filing Fe	ee and \$35 Registered Agent Fee)	

Page 2 of 2

\$52.50 \$8.75

Certified Copy (optional): Certificate of Status (optional): Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

----Certificate of Fact---

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Conversion for Ram Products, Ltd. (file number 800042806), a Domestic Limited Partnership (LP), was filed in this office on January 02, 2002.

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 June 04, 2024.



Phone: (512) 463-5555

gave Helson

Jane Nelson Secretary of State