CT COFF 6000000 264

CORPORATION(S) NAME

| CITGO East Coast Oil Corporation | on | |
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| (V) Foreign | () Dissolution/Withdrawal | () Mark |
| Qualification | () Reinstatement | |
| () Limited Partnership | () Annual Report | () Other |
| ()LLC | () Name Registration | () Change of RA |
| | () Fictitious Name | () UCC |
| () Certified Copy | () Photocopies | |
| () Call When Ready | () Call If Problem | () After 4:30*****(U-UU ******70.0 |
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660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

FILE 1st



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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN COMPLIANC | CE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO |
|---------------------|--|
| REGISTER A FO | DREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIBATION |
| 1 CITGO Fast C | oast Oil Corporation |
| Name of corpo | oration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or To |
| words or abbre | viations of like import in language as will clearly indicate that it is a corporation instead of a |
| natural person | or partnership if not so contained in the name at present.) |
| | y |
| 2. Delaware | 3. 73-1378203 |
| 2. State or country | y under the law of which it is incorporated) (FEI number, if applicable) |
| (Blate of country | y ************************************ |
| 4. 2-14-91 | 5. Perpetual |
| (Da | te of incorporation) (Duration: Year corp. will cease to existor "perpetual") |
| - 11501 | |
| 6. 1-15-01 | st transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) |
| (Date IIIs | t transacted business in Floridaly (blad 525125). |
| 7. 6100 S. Yale A | Avenue, Tulsa, OK 74136 |
| | |
| | (Current mailing address) |
| | (Current maining address) |
| | |
| 8. Refining, mark | keting and transportation of petroleum products |
| (Purpose | e(s) of corporation authorized in home state or country to be carried out in state of Florida) |
| O Name and of | reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) |
| 9. Name and St | reet address of Plotida registered agent. (1.0. Box of Main Brog Box and Brog Box a |
| Name: | C T Corporation System |
| ranio. | |
| Office Address: | 1200 South Pine Island Road |
| | |
| | Plantation , Florida, 33324 |
| | (Zip code) |
| _ | |
| 10. Registered | agent's acceptance: |
| . | ned as registered agent and to accept service of process for the above stated corporation at the place designated in |
| Having been nam | the day registered agent and to accept service of process for the above stated corporation if the place designated with the place designation of the place designated with the place designation of the place designat |
| with the provision | ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept |
| the obligations of | f my position as registered agent. |
| | C T Corporation Bystem |
| | - January March |
| | (Registered agent's signature) John J. Linnihan, Assistant Vice President |
| II Attachadica | certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the |
| Department of Sta | ate, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of |
| which it is incorp | |

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) F1.019 - 9/2/99 CTSystem Online



| A. DIRECTORS (Street address only - P.O. Box NOT acce | ptable) |
|--|--|
| Chairman: See attached officer and director list | 200 |
| Address: | |
| address. | 65 6 K |
| | The state of the s |
| ice Chairman: | 70 Z |
| Address: | 製作 つ |
| | |
| | |
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| | |
| | |
| Pirector: | |
| ddress: | |
| | |
| . OFFICERS (Street address only - P.O. Box NOT a | ecceptable) |
| resident: See attached officer and director list | |
| ddress. | |
| | |
| | |
| ice President: | |
| ddress: | |
| | |
| ecretary: | |
| | |
| ddress: | |
| ddress: | |
| | |
| | |
| reasurer: | |
| reasurer: | |
| Treasurer:Address: | |
| NOTE: If necessary, you may attach an addendum to the appl | lication listing additional officers and/or directors. |
| Address: Address: NOTE: If necessary, you may attach an addendum to the apple. (Signature of Chairman, Yoce Chairman, or an | |

CITGO EAST COAST OIL CORPORATION

(Delaware 2/14/91) Federal I.D. No. 73-1378203

DIRECTORS

NAME & SOCIAL SECURITY NUMBER

W.A. DeVore 454-80-6416

Luis Prince

BUSINESS ADDRES

6100 South Yale Stulsa, OK 74136

620 W. Germantown Pike Plymouth Meeting, PA 19462

OFFICERS

| NAME & SOCIAL SECURITY NUMBER | TITLE | BUSINESS ADDRESS |
|----------------------------------|---------------------|--|
| W.A. DeVore 454-80-6416 | President | 6100 South Yale Tulsa, OK 74103 |
| Luis Prince | Vice President | 620 W. Germantown Pike Plymouth Meeting, PA 19462 |
| Richard M. Bright 442-46-3378 | Controller | 6100 South Yale Tulsa, OK 74136 |
| Stuart A. Rains 440-50-9745 | Secretary | 6100 South Yale Tulsa, OK 74136 |
| Miles E. Davidson 437-62-6336 | Assistant Secretary | 6100 South Yale Tulsa, OK 74136 |
| Dean Hasseman 209-34-4556 | Assistant Secretary | 6100 South Yale Tulsa, OK 74136 |
| M. Jane Merdian 429-78-2639 | Assistant Secretary | 6100 South Yale Tulsa, OK 74136 |
| D. Jeanne Sturges 446-48-4037 | Assistant Secretary | 6100 South Yale Tulsa, OK 74136 |

State of Delaware Office of the Secretary of State



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CITGO EAST COAST OIL CORPORATION"

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND

IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF

JANUARY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

01 JAN 16 AM 11: 20 SECKETARY OF STATE TALLAMASSEF FLORIDA



Harriet Smith Windson

AUTHENTICATION: 0906879

DATE: 01-10-01

2254861 8300

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