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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

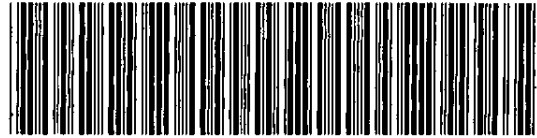
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** LOCAL L P GAS CO.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

TERRY L. KELLEY  
(Name of Person)

LOCAL L P GAS CO.  
(Firm/Company)

P.O. BOX 11  
(Address)

WAYNESBORO, MS 39367  
(City/State and Zip code)

For further information concerning this matter, please call:

TERRY L. KELLEY at (601) 735-4626  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

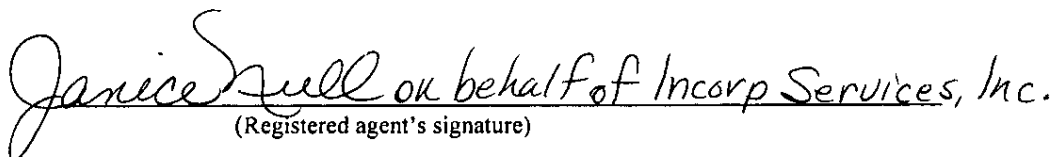
*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. LOCAL L P GAS CO.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. MISSISSIPPI 3. 64-0583946  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 10, 1976 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. HWY 45 N., BUCKATUNNA, MS 39322  
(Principal office address)
- P.O. BOX 38, BUCKATUNNA, MS 39322  
(Current mailing address)
8. DELIVER PETROLEUM PRODUCTS IN FLORIDA  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: INCorp SERVICES, INC.
- Office Address: 17888 67TH COURT NORTH
- Loxahatchee, Florida 33470  
(City) (Zip code)

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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**A. DIRECTORS**

Chairman: TERRY L. KELLEY

Address: P.O. BOX 11

WAYNESBORO, MS 39367

Vice Chairman: THOMAS O. KELLEY, JR

Address: P.O. BOX 11

WAYNESBORO, MS 39367

Director: JERRY R. KELLEY

Address: P.O. BOX 32

WAYNESBORO, MS 39367

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: TERRY L. KELLEY

Address: P.O. BOX 11

WAYNESBORO, MS 39367

Vice President: THOMAS O. KELLEY, JR

Address: P.O. BOX 11

WAYNESBORO, MS 39367


Secretary: JERRY R. KELLEY

Address: P.O. BOX 32, WAYNESBORO, MS 39367

Treasurer: BESSIE KELLEY

Address: HWY 145 SOUTH, WAYNESBORO, MS 39367

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. TERRY L. KELLEY, PRESIDENT  
(Typed or printed name and capacity of person signing application)

# State of Mississippi

## Office of the Secretary of State

C. Delbert Hosemann, Jr., Secretary of State  
Jackson, Mississippi

### CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on March 10, 1976, the State of Mississippi issued a Charter/Certificate of Authority to:

LOCAL L P GAS CO.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand  
and seal of office  
September 25, 2008

*C. Delbert Hosemann, Jr.*

C. Delbert Hosemann, Jr.  
Secretary of State

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