

Document Number Only

F98000001660

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

700002466517--9

-03/24/98--01060--020

*****70.00 *****70.00

Maverick Pipeline Services, Inc.

- ☒ Profit
☐ NonProfit
☐ Limited Liability Co.
☒ Foreign
- ☐ Limited Partnership
☐ Reinstatement
☐ Certified Copy
☐ Call When Ready
☒ Walk In
☐ Mail Out
- ☐ Amendment
☐ Dissolution/Withdrawal
☐ Annual Report
☐ Reservation
☐ Photo Copies
☐ Call if Problem
☐ Will Wait
- ☐ Merger
☐ Mark
☐ Other
☐ Change of R.A.
☐ Fictitious Name Filing
☐ CUS
☐ After 4:30
☒ Pick Up

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Name Availability
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Verifier
Acknowledgment
W.F. Verifier

3/24

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. Maverick Pipeline Services, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations 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.)

2. Michigan

(State or country under the law of which it is incorporated)

3. 38-3385620

(FEI number, if applicable)

4. December 4, 1997

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. 1016 Route 33 East, Freehold, New Jersey 07728

(Current mailing address)

8. Engineering and design with full project management-mainly in the utility industry.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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9. Name and street address of Florida registered agent:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine
Island Road

Plantation, Florida, 33324

(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System



(Registered agent's signature) (Officer)

Marc A. Gillis, Assistant Vice-President

(Type Name and Title of Officer)

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: see attached list of directors

Address: _____

Vice Chairman: see attached list of directors

Address: _____

Director: see attached list of directors

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: see attached list of officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

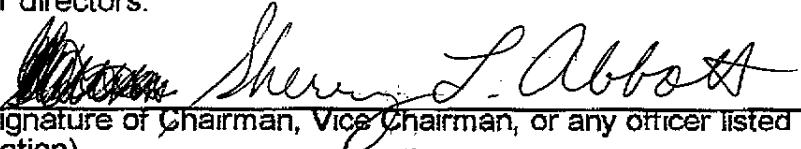
Address: _____

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Treasurer: _____

Address: _____

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sherry L. Abbott, Secretary
(Typed or printed name and capacity of person signing application)

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Name: Obie G. Sims

Choose one or both: ☒ Officer (Title: Chief Executive Officer)
☐ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 1016 Route 33 East
City: Freehold
State: New Jersey
Zip: 07728

Residence address: 43 Outlook Lane
City: Freehold
State: New Jersey
Zip: 07728

Social Security No.: 433-76-3743

Name: Jerry D. Lewis

Choose one or both: ☒ Officer (Title: President)
☐ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 3001 Armand Street, Ste. F
City: Monroe
State: Louisiana
Zip: 71201

Residence address: 1906 Richard Drive
City: Monroe
State: Louisiana
Zip: 71201

Social Security No.: 436-54-1725

Name: M. J. Hwang

Choose one or both: ☒ Officer (Title: Senior Vice President)
☐ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 1016 Route 33 East
City: Freehold
State: New Jersey
Zip: 07728

Residence address: 7 Crestwood Circle
City: Holmdell
State: New Jersey
Zip: 07733

Social Security No.: 153-70-4311

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Name: Randy A. Spence

Choose one or both: ☒ Officer (Title: Vice President, Engineering)
☐ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 3001 Armand Street, Ste. F
City: Monroe
State: Louisiana
Zip: 71201

Residence address: 7547 Westlake Road
City: Sterlington
State: Louisiana
Zip: 71280

Social Security No.: 433-02-9510

Name: Lillian K. Sims

Choose one or both: ☒ Officer (Title: Senior Vice President, Treasurer and Assistant Secretary)
☐ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 1016 Route 33 East
City: Freehold
State: New Jersey
Zip: 07728

Residence address: 43 Outlook Lane
City: Freehold
State: New Jersey
Zip: 07728

Social Security No.: 433-48-5950

Name: Sherry L. Abbott

Choose one or both: ☒ Officer (Title: Secretary)
☐ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 405 Water Street
City: Port Huron
State: Michigan
Zip: 48060

Residence address: 4645 E. Downington Road
City: Deckerville
State: Michigan
Zip: 48427

Social Security No.: 362-78-2432

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Name: William L. Johnson

Choose one or both: ☐ Officer (Title: _____)
☒ Director (Choose one: ☒ Chairman
☐ Vice Chairman
☐ Other Director)

Business address: 405 Water Street
City: Port Huron
State: Michigan
Zip: 48060

Residence address: 2645 Whitney Place
City: Fort Gratiot
State: Michigan
Zip: 48059

Social Security No.: 369-42-1304

Name: Robert J. Digan, II

Choose one or both: ☐ Officer (Title: _____)
☒ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☒ Other Director)

Business address: 405 Water Street
City: Port Huron
State: Michigan
Zip: 48060

Residence address: 623 St. Andrews
City: St. Clair
State: Michigan
Zip: 48079

Social Security No.: 040-52-2608

Name: Larry L. Sherman

Choose one or both: ☐ Officer (Title: _____)
☒ Director (Choose one: ☐ Chairman
☐ Vice Chairman
☒ Other Director)

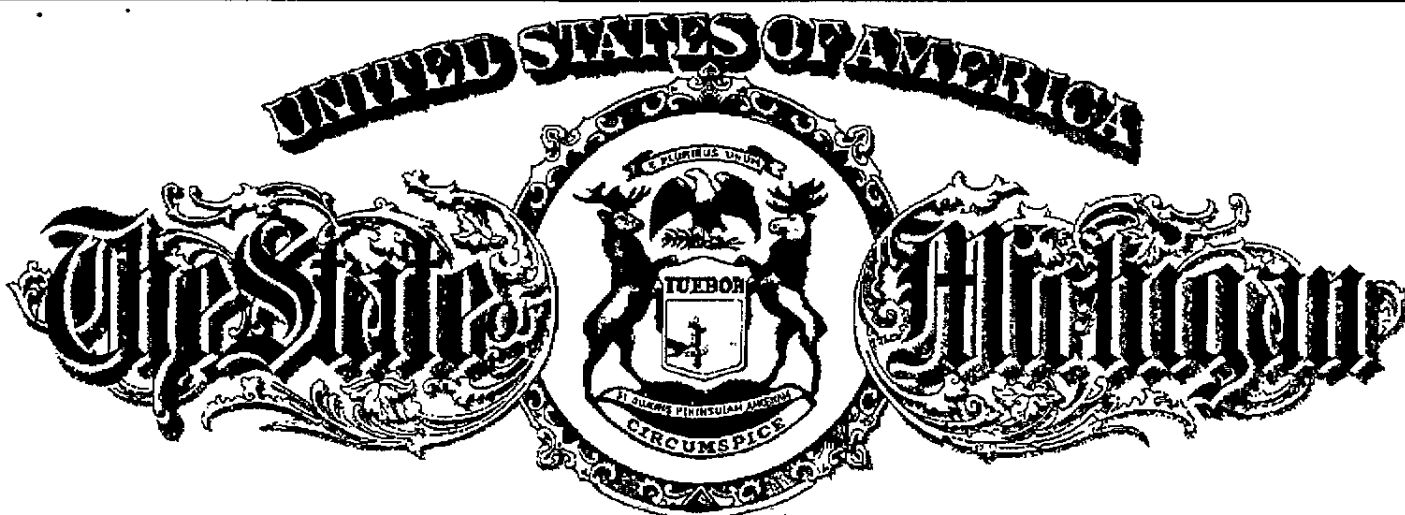
Business address: 405 Water Street
City: Port Huron
State: Michigan
Zip: 48060

Residence address: 3499 Logging Lane
City: North Street
State: Michigan
Zip: 48049

Social Security No.: 378-50-5518

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Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

MAVERICK PIPELINE SERVICES, INC.

was incorporated on December 4, 1997, as a Michigan profit corporation,
and said corporation is in existence under the laws of this State.

This certificate is issued to attest to the fact that the corporation is in good standing
in this office as of this date and is duly authorized to transact business or conduct
affairs in Michigan and for no other purpose. It is in the usual form, made by me
as the proper officer, and is entitled to have full faith and credit given it in every
court and office within the United States.

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In testimony whereof, I have hereunto set my
hand and affixed the Seal of the Department,
in the City of Lansing, this 2nd day
of February, 1998.

Julie Croll

, Director

Corporation, Securities and Land Development Bureau