Piprida Department of State

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Account Name : C T CORPORATION SYSTEM

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RECEIVED 8FEB-8 PH I: II ZREZER/ OF STATE AHASSEE, FLAMIDA

LORIDA/FOREIGN LIMITED LIABILITY CO.

Atlas Copco Prime Energy LLC

Certificate of Status	0
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Page Count	04
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS, IN THE STATE OF FLORIDA:

۱,	ATLAS COPCO PRIME ENERGY LLC [Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	<u> </u>	Ö.")	-
٥r	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attachment of the managers or managing members adopting the alternate name. The alternate name must include impany," "L.L.C.," "LLC.")			
7	Delaware Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	1	· · · · · · · · · · · · · · · · · · ·	•
•	04/28/2006 (Date of Organization) 5. Perpetual (Duration: Year limited liability companies its or "perpetual")	y will c	cease to	<u>-</u>
٠	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<u>.</u>		
	2306 S. Battleground Road, La Porte, TX 77571	_	₹ _K	. 08
	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as fol Atlas Copco North America LLC, 34 Maple Avenue, PO Box 2028, Pine Brook, NJ 07058	lows:	RETARY OF STATE AHASSEE, FLORIDA	FEB -8 AM 9: 14
j ns	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official havi pristlection under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a forestation of the certificate under outh of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida:			ords in
_1	Rental of compressors and reluted equipment			•
	Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the penalities of penjury that the facts stated herein are true.)	1 1 s	_	
	Hillary England, Authorized Represent	COT!	ہو۔	

FLOSS - UNITATIONS OF FAIling Manager Online

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

to be consult about the state of the state for	
to be used in the state of Florida is:	08 F
ess of the registered agent and office a	AHASSE
(Name)	100 1100 1100 1100
d	RIDA
Address (P.O. Box NOT ACCEPTABLE)	
FL 33324	
•	(Name) I Address (P.O. Box NOT ACCEPTABLE)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ATLAS COPCO PRIME ENERGY LLC" 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 SEVENTH DAY OF FEBRUARY, A.D. 2008.

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

08 FEB -8 AM 9: 14
SEGRETARY OF STATE

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You may vorify this cortificate onling

Varnet Smile Hinden

Harriet Smith Windson, Secretary of State

AUTHENTICATION: 6367959

DATE: 02-07+08

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