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EXAMINER

SECRETARY OF STATE
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations
SUBJECT: FNB Project Partners, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Cynthia House
Name of Person
FNB Project Partners, LLC
Firm/Company
4055 International Plaza, Suite 200
Address
Fort Worth, TX 76109-4895
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cindy House at (817) 735-7391
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\sumset \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$

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:

EIVITED EIABIETT COMI ANT TO TRANSACT BUSINESS IN	THE STATE OF FLORIDA,	
FNB Project Partners, LLC		
(Name of Foreign Limited Liability Company; must i	include "Limited Liability Company," "L.L.C.," or "LLC.")	
·		
If name unavailable, enter alternate name adopted for the nu	surpose of transacting business in Florida and attach a copy of the w	ritten
	e alternate name. The alternate name must include "Limited Liabilit	
Company," "L.L.C," "LLC.")		•
2. Texas	3. <u>20-4788535</u>	
(Jurisdiction under the law of which foreign limited liabilicompany is organized)	ity (FEI number, if applicable)	
	5	
12/28/2005	5. Perpetual	
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")	
	oxide of perpendial)	
5		
(Date first transacted business in (See sections 608.501 & 608.502	n Florida, if prior to registration.) P.S. to determine penalty liability)	
	The se destinate penany nations,	
7. 4055 International Plaza, Suite 200		
F. 4 M 41. TV 70400 4005		
Fort Worth, TX 76109-4895	(D' 1 1000)	
(Street Addi	lress of Principal Office)	
B. If limited liability company is a manager-manager	ged company, check here	
5. If finited habinty company is a manager-manage	ged company, encek here [v]	
The name and usual business addresses of the n	managing members or managers are as follows:	
. The hame and assure business addresses of the h	managing memoers of managers are as follows.	
Lawrence P. Eckersley - 4055 Internation	nal Plaza, Suite 200, Fort Worth, TX 76109	
Coy M. Veach - 4055 International Pla	aza, Suite 200, Fort Worth, TX 76109	
Larry Ridgway - 1007 N. Earl Rudde	ler Frwy., Bryan, TX 77802	
,	190 days old, duly authenticated by the official having custody officeo	rds in
•	ocopy is not acceptable. If the certificate is in a foreign language a	TWO-S
ranslation of the certificate under oath of the translator must be	submitted.) $\frac{SSR}{SR}$ $\frac{R}{R}$	A. A. A.
1. Nature of business or purposes to be conducted	ed or promoted in Florida:	
		i i
Construction Mangement Services	, ž ,	~
\mathcal{A}_{n} () §		
- Villian 1° C	chely	
	n authorized representative of a member.	
· ·	execution of this document constitutes an affirmation under the	
	are true. I am aware that any false information submitted in a	
•	itutes a third degree felony as provided for in s.817.155, F.S.)	
Larry P. E	<u> </u>	
Typed or prir	nted name of signee	

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.

1. The name of the Limited Liability Co FNB Project Partners, LLC	• •	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street address	ess of the registered agent and office are:	
CT Corporation Syste	em	
	(Name)	
1200 South Pine Is	land Road	
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
Plantation	_{FL} 33324	
	City/State/Zip	

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.

(Signature)

Michael E. Jones
Assistant Secretary

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



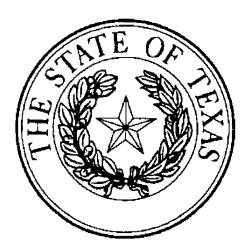
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for FNB Project Partners, LLC (file number 800590932), a Domestic Limited Liability Company (LLC), was filed in this office on December 28, 2005.

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 February 22, 2012.



Hope Andrade Secretary of State

Phone: (512) 463-5555