

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617~6383

000857.1151120

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone

(850) 222~1173

Fax Number

(850)224-1640

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company PHIBRO SERVICES LLC

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Certificate of Status	0

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Corporate Filing Menu

J. BRYAN

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EXAMINE 22 4:31 PM

COVER LETTER

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TO: Registration Section Division of Corporations	COVER LETTER e of Limited Liability Company lity Company for Authorization to Transact Business in Florida," Certificate of over referenced foreign limited liability company to transact business in Florida.
SUBJECT: Phibro Services LLC	in the second se
	e of Limited Liability Company
The enclosed "Application by Foreign Limited Liabi Existence, and check are submitted to register the ab Please return all correspondence concerning this mat	
The second of second se	
	Name of Person
	Firm/Company
	Address
	City/State and Zip Code
David Ross @oxy.com	
_ · · ·	o be used for future annual report notification)
For further information concerning this matter, please	se cail:
Stephen Parise	at (310) 443-6541
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahasseo, FL 32301
Enclosed is a check for the following amou	na & [JS 155.00 Filing Fee & [JS 160.00 Filing Fee, Certificate

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: 1. Phibro Services LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC,") 2. Delaware 3. 27-1186607 (Jurisdiction under the law of which foreign limited liability company is organized) FEI number, if applicable) 4. October 8, 2009 5, perpetual (Date of Organization) (Duration: Year limited liability company exist or "perpetual") N/A (Data first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 P.S. to determine penalty liability) Greenway Plaza, Houston, TX 77046 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Oxy Energy Services, Inc., 5 Greenway Plaza, Houston, TX 77046 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful business or activities for which a limited liability company is formed

Signature of a member or an authorized representative of a member.

not with section 608.408(3), F.S., the execution of this document constitutes an affirmation

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

S. P. Parise, Assistant Secretary

Typed or printed name of signee

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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.

s Florida street addr	ess of the registered agent and office	a are:
Corporation System		12.00
	(Nams)	<u> </u>
	_	72.7
Florica Street	: Address (P.O. Box NOT ACCEPTABLE)	
ntation	FL 33324	
	City/State/Zip	A
	Corporation System South Pine Island Rose Florids Street	(Name) South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) station FL 33324

\$ 25.00 \$ 30.00

5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PHIBRO SERVICES 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 SECOND DAY OF JULY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PBIBRO SERVICES LLC" WAS FORMED ON THE EIGETH DAY OF OCTOBER, A.D. 2009.

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

FILLU 2012 JUL -2 AM 8: 26 SECRETARY OF STATE

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You may verify this certificate onlin

Joffrey W. Bullock, Secretary of State

DATE: 07-02-12

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