# M1500000431

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
· · · · · · · · · · · · · · · · · · ·
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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W15-1672, TITLE

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2015 JAN 15 P 4 27 SECRETARY OF STAR

B. BOSTICK

JAN 1 6 2015

**EXAMINER** 

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

TOE MIDSTDEAM I I C

. TPE MIDSTREAM LLC

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...

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

	DOUGL	AS A SA				<u> </u>		_	
			Name o	f Person					
	DASAH	M CO							
		·	Firm/C	ompany				_	
	1998 FC	X GRA	PE LO	OP					
			Add	iress				_	
	LUTZ, F	L 3355	8-3308	3					
			•	nd Zip Code				_	
	HOFFM.			$\overline{}$					
		E-mail address: (	to be used for	future annual rep	ort notific	ation)	2ig	2015	
For further info	mation concerning	this matter, please	e call:				250	5 JAN	
LH	OFFMA	N	at	813	421	-4002	334 334 334	<u> </u>	i i i i i i i i i i i i i i i i i i i
	Name of	Contact Person		Area Code	Da	ytime Telephone	Number	_ บ	
Division Registr P.O. B	ing ADDRESS: on of Corporations ation Section ox 6327 assee, FL 32314		Registration Clifton Build	Corporations Section ling live Center Circ	ele			) # 2 <sub>7</sub>	O
	check for the fo	ollowing amour  \$130.00 Filing  Certificate of	Fee & 🔲	\$155.00 Filing Certified Cop		□ \$160.00 F of Status	Filing Fee, & Certifie		

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTE		,,,,,
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINI 1 TPE MIDSTREAM LLC	288 IN THE STATE OF FLORID	<b>DA:</b>
1. (Name of Foreign Limited Liability Company; must include "Limited Liability Company; must include "Liability Company; m	ted Liability Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting Liability Company," "L.L.C," or "LLC.")	thusiness in Florida. The alternate na	ame must include "Limited
<sub>2</sub> OKLAHOMA 3 46	6-5485752	· ·
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applica	able)
<sub>4.</sub> 8/18/14		
(Date first transacted business in Florida, (See sections 605.0904 & 605.0905, F.S. to d	if prior to registration.) letermine penalty liability)	
5 11902 S GRANITE AVE, TULS	A, OK 74137	2015
		-
(Street Address of Princ		
<sub>6</sub> PO BOX 690960, TULSA, OK	74169	
(Mailing Addre	\$5)	
7. The name, title or capacity and address of the person(s)	who has/have authority to m	anage is/are:
DOUGLAS A SAHM PRESIDE	· · · · · · · · · · · · · · · · · · ·	
1998 FOX GRAPE LOOP		
		<del></del>
LUTZ, FL 33558-3308		<u> </u>
8. Attached is an original certificate of existence, no more the having custody of records in the jurisdiction under the law of acceptable. If the certificate is in a foreign language, a translemust be submitted)	f which it is organized. (A p	photocopy is not
52 A 2	2//	
Signature of an autho (In accordance with section 605.0203, F.S., the execution of this document constitutes an		v that the facts stated herein are true
am aware that any false information submitted in a document to the Department of State c	constitutes a third degree felony as provid	
DOUGLAS A SAHM		<u></u>
Typed or printed name	of signee	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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. Th	e name o	f the	Limited	Liability	Company	is:
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### TPE MIDSTREAM LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

HOFFMAN BU	JSINESS SERVICES,	LL© <sub>SC</sub>	2015	
	(Name)	1,7	c	-17
1851 COLLIE		15 15	**************************************	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			־ט־	
LUTZ	33549 FL	rice Files	<b>#</b> : 2-	
	City/State/Zip	30	ب.	

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 605, Florida Statutes.

(Signature)

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

Lawrence N. Hoffman

#### OFFICE OF THE SECRETARY OF STATE



# CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>TPE MIDSTREAM LLC</u> whose registered agent is <u>CURTIS L RICE</u>, with its registered office at <u>11902 S GRANITE AVE TULSA</u> <u>74137 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.

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IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>23rd</u>, day of <u>December</u>, 2014.

Secretary Of State

C. Level



January 9, 2015

DOUGLAS A. SAHM 1998 FOX GRAPE LOOP LUTZ, FL 33558-3308

SUBJECT: TPE MIDSTREAM LLC Ref. Number: W15000001872

We have received your document for TPE MIDSTREAM LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 615A00000522

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