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(Business Entity Name)

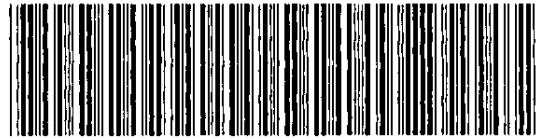
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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16-40236

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN -2 PM 2:38

RECEIVED
DEPARTMENT OF STATE
16 JUN -2 AM 10:38

JUN 03 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 3, 2016

NATIONAL CORPORATE RESEARCH

SUBJECT: TLP MANAGAMENT SERVICES, LLC
Ref. Number: W16000040236

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 616A00011609

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TALLAHASSEE, FLORIDA

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Date: 06/02/2016

Account #: I20000000088

Name: Tamara Clark

Reference #: D285673

ENTITY NAME: TLP MANAGAMENT SERVICES, LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Annual Report

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other: _____

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Authorized Amount:

\$125.00

Signature: _____

Tamara Clark

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TLP Management Services 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:

Michael Hammell

Name of Person

TransMontaigne, Inc.

Firm/Company

1670 Broadway, Suite 3100

Address

Denver, CO 80202

City/State and Zip Code

mhammell@transmontaigne.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Ellsabeth Wallace

Name of Contact Person

at (**817**)

Area Code

531-6302

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
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. TLP Management 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 Florida. The alternate name must include "Limited
Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)

4. 06/01/2016
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1670 Broadway, Suite 3100
Denver, CO 80202
(Street Address of Principal Office)

6. c/o TransMontaigne, Inc., 1670 Broadway, Suite 3100
Denver, CO 80202
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: National Corporate Research, Ltd., Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:

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 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 obligations of my position as registered agent.

Harley A. Butler, Asst. Sec.
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Gulf TLP Holdings, LLC, its sole Member c/o ArcLight Capital Partners, LLC, 200 Clarendon St., 55th Floor, Boston, MA 02116

Daniel R. Revers, President of Gulf TLP Holdings, LLC c/o ArcLight Capital Partners, LLC, 200 Clarendon St., 55th Floor, Boston, MA 02116

Kevin M. Crosby, Vice President of Gulf TLP Holdings, LLC c/o ArcLight Capital Partners, LLC, 200 Clarendon St., 55th Floor, Boston, MA 02116

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath
of the translator must be submitted)

X
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Daniel R. Revers, as Authorized Person of Gulf TLP Holdings, LLC, the sole Member of TLP Management Services LLC

Typed or printed name of signee

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TLP MANAGEMENT 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 FIRST DAY OF JUNE, A.D. 2016.


AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TLP MANAGEMENT SERVICES LLC" WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2016.

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

16 JUN -2 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

5955492 8300

SR# 20164209163

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202413973

Date: 06-01-16