

**H160000006871**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**\*RE-SUBMIT\***

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

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

Email Address: \_\_\_\_\_

Foreign Limited Liability Company  
Optimal Field Services, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

2016 AUG 25 AM 10:16

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2016 AUG 25 AM 10:15

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8/25/2016 10:12:27 AM From: To: 8506176383( 2/5 )



August 19, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JOHN P. DOGGETT  
4725 HWY 28 E  
PINEVILLE, LA 71360

SUBJECT: OPTIMAL FIELD SERVICES, LLC  
REF: W16000057010

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

Lines 2 (Jurisdiction) and 3 (FEI number) did not fax through.

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.

Karen A Saly  
Regulatory Specialist II

FAX Aud. #: H16000202267  
Letter Number: 316A00017611

**\*RE-SUBMIT\***  
Please retain original filing  
date of submission 8/16

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Optimal Field 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:

John P. Doggett

Name of Person

Optimal Field Services, LLC

Firm/Company

4725 Hwy 28 E

Address

Pineville, LA 71360

City/State and Zip Code

emilyv.baum@crestoperations.com

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

For further information concerning this matter, please call:

Emily Baum

318

767-5671

Name of Contact Person

at ( )

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

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. Optimal Field 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

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-2605207

(VBI number, if applicable)

4. \_\_\_\_\_

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

5. 6113 La Hwy 73

Geismar, LA 70433

(Street Address of Principal Office)

6. 4725 Hwy 28 E

Pineville, LA 71360

(Mailing Address)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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.

By: C T Corporation System

(Signature)

(Registered agent's signature)

M. E. Jones, Asst. Sec'y.

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

John P. Doggett/CAO

4725 HWY 28

PINEVILLE, LA 71360

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)

John P. Doggett  
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.

John P. Doggett

Typed or printed name of signor

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OPTIMAL FIELD 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 FIFTEENTH DAY OF AUGUST, A.D. 2016.

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

FILED  
2016 AUG 25 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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SR# 20165366969

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202829341

Date: 08-15-16