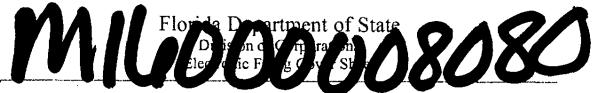
Division of Corporations



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	Division of Corporat	ions		
	Fax Number : (85)	0)617-6383	,	\simeq
From:				2017
	Account Name : C T	CORPORATION SYSTEM		(D)
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		0) 205-8842		}
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Foreign Limited Liability Company ParFab Mechanical Services, LLC

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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	stration Section sion of Corporation	18		?	••	
SUBJECT:	Parfab Mechanical	Services, LLC				
SUBJECT		Name of 1	Limited Liability C	ompany		
The enclosed Existence, and	"Application by For left to the submitted are submitted."	eign Limited Liability Comp d to register the above refere	oany for Authorizat enced foreign limite	ion to Trai ed liability	psact Business in Florida," Certificate of company to transact business in Florida.	
Please return a	all correspondence (concerning this matter to the	following:			
	Tena Harrison	,				
		N	ame of Person			
	ParFab Field S	ervices, LLC				
		Fi	irm/Company			
	15615 E. 590 I	Road		,		(811)
			Address		***************************************	
	Inola, OK 740	36				
		City/S	late and Zip Code			
	tharrison@parfe	busa.com			ing _ m	
		E-mail address; (to be used	d for future annual	report noti	fication)	
For further inf	formation concernir	g this matter, please call:			fication)	
Lind	la Stauffer		713 at (332-379	inne Telephone Nümber	
w.,	Name (of Contact Person	Area Code	Day	ime Telephone Number	
Divis Regi P.O.	ILING ADDRESS: sion of Corporation stration Section Box 6327 ahassee, FL 32314			Division of Registrati Clifton Bi 2661 Exe	ADDRESS: O	
	check for the follow 125.00 Filing Fee	ring amount: \$130.00 (filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	· LOVA!

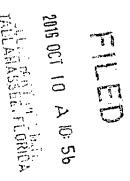
APPLICATION BY FOREIGN LIMITED CIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE NITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

COMEDIA TO THE STATE OF FIDARIDA
ParFab Mechanical 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 81-3190715
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 8727 Freedom Lane
Baylown, TX 77523
(Street Address of Principal Office)
6, 15615 E. 590 Road
Inola, OK 74036
(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 Florida 33324 Un
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 us 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 complète performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. CT Corporation System
(Registered agent's signature) ** Linda Stauffer, Assistant Secretary
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are;
Conner Searcy, Manager, 200 Crescent Court, Suite 1040, Dallas, TX 75201-2103
See Complete List Attached
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)
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.
Alvin Moore, Manager
Typed or printed name of signer

PARFAB MECHANICAL SERVICES, LLC MANAGERS

Manager Name	Address		
Conner Searcy	200 Crescent Court, Suite 1040, Dallas, TX 75201-2103		
Chris Zugaro	200 Crescent Court, Suite 1040, Dallas, TX 75201-2103		
Desmond Henry	200 Crescent Court, Suite 1040, Dallas, TX 75201-2103		
Jonathan Nunnaley	200 Crescent Court, Suite 1040, Dallas, TX 75201-2103		
Alvin Moore	15615 East 590 Road, Inola, OK 74036		
Billy Martin, Jr.	8727 Freedom Lane, Baytown, TX 77523		
Will Parker	8727 Freedom Lane, Baytown, TX 77523		



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<u>Delaware</u>

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PARFAB MECHANICAL 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 TWENTY-NINTH DAY OF AUGUST, A.D. 2016.

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

6073885 8300 SR# 20165568019

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

Softrey W. Bulbac B. Socrobany of State

Authentication: 202906899

Date: 08-29-16