## M1800000 1056

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## COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	Tartan Oil LLC ECT:	
	Name of Limited Liability	Company
	nclosed "Application by Foreign Limited Liability Company for Authorizate, and check are submitted to register the above referenced foreign lim	
Please	return all correspondence concerning this matter to the following:	
	Chris Muth, Tax Department	
	Name of Person	<del>,</del>
	Tartan Oil LLC	
	Firm/Company	
	PO Box 10146	
	Address	
	Knoxville, TN 37939	
	City/State and Zip Cod	le
	chris.muth@pilottravelcenters.com	
	E-mail address: (to be used for future annu	al report notification)
For fu	rther information concerning this matter, please call:	
	Chris Muth 865	474-3421 )
	Name of Contact Person Area Cod	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
Enclos	sed is a check for the following amount:  S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee Certificate of Status Certified Cop	

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

IN COMPLIANCE WITH SECTION 603.0502, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

COM THE TO THE HEAD OF BO	KINGLED IN CHILGIANIC OF PLOIDING		
1. Tartan Oll LLC			
(Name of Foreign	Limited Linbility Company; must include "Limited	Liability Company," "L.L.C.," or "LLC.	")
<del></del>			
	ame adopted for the purpose of transacting business in Flor	ids. The alternate name must include "Limited L	iability Company," "L.L.C," or "LLC.")
2. Delaware		3 82-3440054	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI nu	mber, if applicable)
a 01/01/2017			
7.	(Onte first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	egistration.)	<del></del>
- SSAR Lanus Duiva	(See Sections 003.0904 & 603.0905, F.S. to detempt		
5. 5508 Lones Drive (Sireel Address of I	Pancinal Office)	6. PO Box 10146 (Mailing A	de la companya de la
Attention: Tax Departr		Attention: Tax Departme	
Knoxville, TN 37909		Knoxville, TN 37939	<del></del>
1000011110, 111 37303		Knoxyme, 11v 37939	- 30 FILL
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	CT Corporation System		
1.577,01			독한 원
Office Address:	1200 South Pine Island Road		57 0A
	Plantation	23374	
	(City)	, Florida 33324	ade)
Registered agent's accep	tance:		
Having been named as re	gistered agent and to accept service of p	process for the above stated limits	ed liability company at the place
aesignatea in tius appuca	tion, I hereby accept the appointment at ons of all statutes relative to the proper	s registered agent and agree to a	ct in this capacity. I further agree
and accept the obligations	s of my visition as registered agent.	ana complete perfornimice of in	y aunes, and I am jamiliar will
• 0	( 5 mal		
	year your	Nathan S. Giffin Asst. Secreta	iry
	Romindred agent's	ngnature)	
8. The name, title or capa	icity and address of the person(s) who ha	s/have authority to manage is/are:	
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Officer	Shameek Konar		
	5508 Lonas Drive		
	Knoxville, TN 37909	-	
		.	
		-	· · · · · · · · · · · · · · · · · · ·
		-	
(Use attachments if necess	sary)		
9 Attached is a certificate	of existence, no more than 90 days old,	duly gurbantianted by the official	having austadu af racauda in the
jurisdiction under the law	of which it is organized. (If the certificat	e is in a foreign language, o transf	ation of the certificate under oath
of the translator must be su	ibmitted)		and of the certificate and of cam-
10. This document is execu	uted in accordance with section 605,0203	l (I) (b), Florida Statutes. I am aw	are that any false information
submitted in a document to	the Department of State constitutes a the	rd degree felony as provided for i	n s.817.155, F.S.
	- taceu	Labora	
	Signature	of an nullionized person	<del>······</del>
	Shameek Konar		

Typed or printed name of signee

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TARTAN OIL ILC" 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 TWENTIETH DAY OF DECEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TARTAN OIL LLC"
WAS FORMED ON THE SEVENTEENTH DAY OF NOVEMBER, A.D. 2017.

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

6621522 8300 SR# 20177690336 Authentication: 203804685

Date: 12-20-17