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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

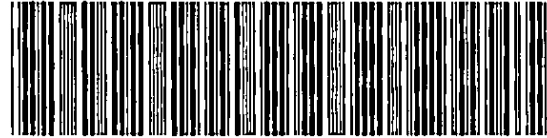
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

February 5, 2018

TO: Registration Section
Division of Corporations

SUBJECT: RIATA RANCH MINERALS, 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:

H. RANDOLPH KLEIN
Name of Person
KLEIN & KLEIN, LLC
Firm/Company
40 SE 11TH AVENUE
Address
OCALA, FL 34471
City/State and Zip Code
randy@kleinandkleinpa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

H. RANDOLPH KLEIN at (352) 732-7750
Name of Contact Person 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. RIATA RANCH MINERALS, 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. WYOMING 3. 81-2313220
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
 (See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. 626 WEST VALLEY ROAD
(Street Address of Principal Office)
TORRINGTON, WY 822240

6. P.O. BOX 670
(Mailing Address)
TORRINGTON, WY 82240

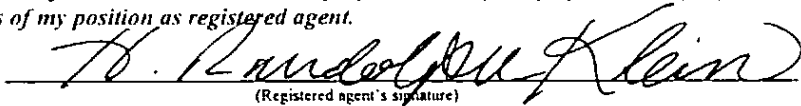
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: H. RANDOLPH KLEIN
 Office Address: 40 SE 11TH AVENUE
OCALA, Florida 34471
(City) (Zip code)

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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.


(Registered agent's signature)

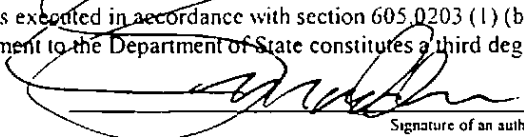
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MGR</u>	<u>SHAWN MADDEN</u> <u>P.O. BOX 670</u> <u>TORRINGTON, WY 82240</u>	<u>MGR</u>	<u>EMILY MADDEN</u> <u>P.O. BOX 670</u> <u>TORRINGTON, WY 82240</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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.)

10. 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.



Signature of an authorized person

SHAWN MADDEN

Typed or printed name of signer

State of Wyoming

Office of the Secretary of State



United States of America,
State of Wyoming } ss.

I, EDWARD F. MURRAY, III, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuances of this certificate have been fulfilled.

CERTIFICATE OF ORGANIZATION

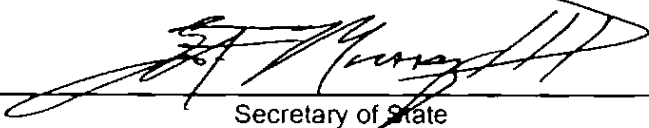
RIATA RANCH MINERALS, LLC

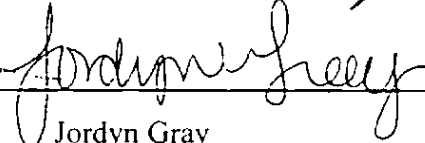
Filed: (August 07, 2014)

Accordingly, the undersigned, by virtue of the authority vested in me by law, hereby issues this Certificate.

IN TESTIMONY WHEREOF, I have hereunto set my hand
and affixed The Great Seal of the State of Wyoming, Done
at Cheyenne, the Capital, this 29th day of January A.D. 2018.




Secretary of State

By 
Jordyn Gray