Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000207596 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone Fax Number : (954)208-0845

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

Email Address:___

3

Foreign Limited Liability Company Ameron Water Transmission Group, LLC

Certificate of Status	Ü
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

K SALY JUL 1 9 2018

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

IN COMPLIANCE WITH SECTION COMPANY TO TRANSACT BUSINE	605.0002, FLORIDA STATUTES, THE FOL SS IN THE STATE OF FLORIDA:	LOWENG IS SUBMITTED TO REGISTE	R A FOREIGN LIMITED LIABILITY
1. Ameron V (Name of Pereign Linns	Vater Transmis	Sion Group	LLC
2 Delaware	opred for the purpose of transacting business in Therida	3.47 - 250	lky Company, ""LLC," or "LLC," or "L
4	Date first transacted business in Florida, if prior to reg See auctions 605 0404 & 605,0905, F.S., to determine	istration.) pennity hability)	
: 7909 Parkwood	1 Cirde Dr.	6. 7909 Parkwood	od Circle Dr.
Houston, Te	xas 77036	Houston, Te	exas 77036
			ET
	Florida registered agent: (P.O. Box 1	NOT acceptable)	
isano.	Corporation System	· · · · · · · · · · · · · · · · · · ·	0 1
Office Address: 12	00 South Pine Island Road	name are a series . Warrough Mer offe At	
. <u>Pl</u> :	anation (Cuy)	, Florida 33324	
designated in this application, to comply with the provisions	red agent and to accept kervice of prolifereby accept the appointment as to fall statutes relative to the proper any position as registered agent. (C.T. Corporation System (Registered seco's tip.	registered agent and agree to act in a complete performance of my defined tones. Assessment to the control of t	'n this capacity. I-further agree 💎 🛬
8. The name, title or cupacity Title or Capacity:	and address of the person(s) who has/	have authority to manage is/uro: Title or Capacity:	Name and Address:
Sole Manager	Trevor B. Martin 7909 Parkwood Circle Howdon, Dr 77034	Vice President- Taxation	Crain GOSS 1909 Par Knood Grue Dr. Howston, TX 17036
Vice Bresident + Assistant seveta	Brigitte Hunt 1900 Partwood Girle Dr. Howston Tx 7 1000	Assisant Secretary	Vincent Gilles ple 7909 Parkwood Link D. Houston, TX 77086
. (Use attachments if necessary)	•		
9. Attached is a certificate of e- jurisdiction under the law of wl of the translator must be submi	xistence, no more than 90 days old, duich it is organized. (If the certificate sted)	aly authenticated by the official has is in a foreign language, a translati	ving custody of records in the on of the certificate under oath
submitted in a document to the	in accordance with section 605.0203 (Department of State constitutes a third	d degree felony as provided for in s	e that any talse information s.817.155, F.S.
	12 Signature of	an authorized porton	
g	Bylte Hunt		



Page 1

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

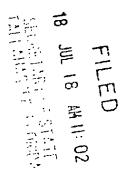
DELAWARE, DO HEREBY CERTIFY "AMERON WATER TRANSMISSION GROUP, LLC"

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 SEVENTEENTH DAY OF JULY, A.D. 2018.

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



5569667 8300
SR# 20185712944
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203081047

Date: 07-17-18