

Ma0000001794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

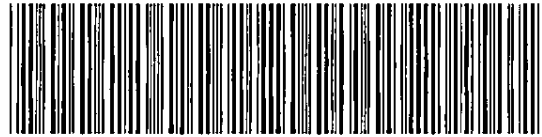
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2020 FEB 14 A 8:54  
TAMM HALL, MI 48106

FEB 17 2021

T. LEAHY

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 181090 7890454

AUTHORIZATION :



COST LIMIT : \$125.00

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ORDER DATE : February 13, 2020

ORDER TIME : 9:52 AM

ORDER NO. : 181090-010

CUSTOMER NO: 7890454  
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FOREIGN FILINGS

NAME: CIRCOR ENERGY PRODUCTS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT#

EXAMINER: \_\_\_\_\_

FILE 2nd

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CIRCOR Energy Products, 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:

Jacqueline Lucas

\_\_\_\_\_  
Name of Person

CIRCOR Energy Products, LLC

\_\_\_\_\_  
Firm/Company

30 Corporate Drive, Suite 200

\_\_\_\_\_  
Address

Burlington, MA 01803

\_\_\_\_\_  
City/State and Zip Code

officeofthegeneralcounsel@circor.com

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

For further information concerning this matter, please call:

Jacqueline Lucas

781

270-1235

\_\_\_\_\_  
Name of Contact Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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. CIRCOR Energy Products, 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.")

Oklahoma

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

73-0939537

3. (FEI number, if applicable)

2/11/2020

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

1500 SE 89th Street

5. (Street Address of Principal Office)

30 Corporate Drive, Suite 200

6. (Mailing Address)

Oklahoma City, OK 73149

Burlington, MA 01803

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

Name: Corporation Services Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida

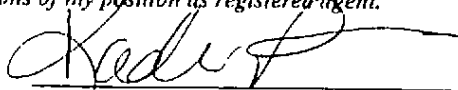
32301

(Zip code)

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2020 FEB 14 A 8:54  
TALLAHASSEE, FLORIDA

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)

Kadesha Roberson  
Asst. Vice President

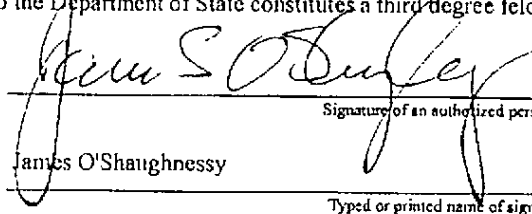
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Scott A. Buckhout</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Chadi Chahine</u>
<input type="checkbox"/> Member	Address: <u>30 Corporate Drive, Suite 200</u>	<input type="checkbox"/> Member	Address: <u>0 Corporate Drive, Suite 200</u>
<input type="checkbox"/> Authorized	<u>Burlington, MA 01803</u>	<input type="checkbox"/> Authorized	<u>Burlington, MA 01803</u>
Person	<u>Manager and President</u>	Person	<u>Manager and Vice President</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Andrew Farnsworth</u>	<input type="checkbox"/> Manager	Name: <u>David Mullen</u>
<input checked="" type="checkbox"/> Member	Address: <u>30 Corporate Drive, Suite 200</u>	<input checked="" type="checkbox"/> Member	Address: <u>30 Corporate Drive, Suite 200</u>
<input type="checkbox"/> Authorized	<u>Burlington, MA 01803</u>	<input type="checkbox"/> Authorized	<u>Burlington, MA 01803</u>
Person	<u>Vice President</u>	Person	<u>Vice President</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>James O'Shaughnessy</u>	<input type="checkbox"/> Manager	Name: <u>Tanya Dawkins</u>
<input checked="" type="checkbox"/> Member	Address: <u>30 Corporate Drive, Suite 200</u>	<input checked="" type="checkbox"/> Member	Address: <u>30 Corporate Drive, Suite 200</u>
<input type="checkbox"/> Authorized	<u>Burlington, MA 01803</u>	<input type="checkbox"/> Authorized	<u>Burlington, MA 01803</u>
Person	<u>Secretary</u>	Person	<u>Treasurer</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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  
 James O'Shaughnessy  
 \_\_\_\_\_  
 Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE



**CERTIFICATE OF GOOD STANDING**  
**DOMESTIC LIMITED LIABILITY COMPANY**

*I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.*

*I FURTHER CERTIFY that CIRCOR ENERGY PRODUCTS, LLC whose registered agent is CORPORATION SERVICE COMPANY, with its registered office at 10300 GREENBRIAR PLACE, OKLAHOMA CITY 73159 7653 USA Oklahoma is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.*



*IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 14th, day of February, 2020.*

A handwritten signature in cursive script, which appears to read "Michael Rogers", is written over a horizontal line.

Secretary Of State