(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer





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2021 JAN -6 AH 9: 34

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स्राधाताताल्यः

### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, Fl. 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



### ORDER FORM

Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST\_DATE 1/5/2021

**PRIORITY** Routine

OUR REF\_#\_(Order\_ID#) 881273

ORDER ENTITY

TORCSILL FOUNDATION, LLC

PLEASE PERFORM THE FOLLOWING SERVICES	»
TORCSILL FOUNDATION, LLC (FL)	
File the attached foreign qualification document	
	the street and the transfer and the street and the
NOTES:	
\$125.00 Authorized	
Email address for annual report reminders: profession	onal@harborcompliance.com
RETURN/FORWARDING INSTRUCTIONS:	
ACCOUNT NUMBER: I20050000052	

ACCOUNT NOT IDEN: 120030000032

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and couner package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, January 5, 2021 Page 1 of 1

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

orcSill Foundations, I					
(Name of Fareign	Limited Liability Company, must include "Lim	ited Liability Co	impany," "L.L.C.," or "LLC.")		-
pe unavailable, enter alternate n	arne adopted for the purpose of transacting business in	Florida. The alterna	ste name must include "Limited Liabil	ity Company," "L.L.C," or "LL	<u>.</u> )
klahoma		45	5-4041337		
(Jurisdiction under the law of which foreign limited liability company is organized)		3. —	(FEI number, if applicable)		
12/29/2020					
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to deter	to registration ) mine penalty liabil	íty)	_	
12000 Aerospace Ave, STE 115		12	000 Aerospace Ave, STE	115	
(Street Address of Frincipal Office)		6	(Mailing Addres	s)	-
Houston, TX 77034		He	ouston, TX 77034		
· · ·		_			_
lame and street addres	s of Florida registered agent: (P.O. Bo	NOT acce	eptable)	2021	-
lame and <u>street addres</u> Name:	s of Florida registered agent: (P.O. Bo	NOT acce	eptable)	2021 JAN -1	- - - -
	•	NOT acce	eptable)		
Name:	REGISTERED AGENTS INC.	NOT acce		-6	
Name:	REGISTERED AGENTS INC. 7901 4TH ST N STE 300	NOT acce	<u> </u>	-6 A# 9:	

8. For initial index manage [up to six (6	ing purposes, list names, title or copacity and a	addresses of the primary m	sembers/managers or persons authorized to				
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:				
Manager	Name: White Deer Energy	☐ Manager	Name: Tim Swift,				
Member	Address: 700 Louisiana St., STE 4770	Member	Address: 12000 Aerospace Ave, STE 11:				
Authorized	Houston, TX 77034	Authorized	Houston, TX 77034				
Person		Person					
Other	Other	Other	Other				
Manager	Name: Scan McArthur	☐ Manager	Name:				
Member	Address:12000 Aerospace Ave, STE 115	<u> </u>					
Authorized	Houston, TX 77034	☐ Member ☐ Authorized	Address:				
Person		Person					
Other	Other	Other	Other				
Manager	Name:	Manager	Name:				
☐Member	Address:	☐ Member	Address:				
Authorized		☐ Authorized					
Person		Person					
Other	Other	Other	Other				
indexed individuals:	se an attachment to report more than six (6). T may be added to the index when filing your Flo	orida Department of State	Annual Report form.				
jurisdiction under the of the translator mus	ficate of existence, no more than 90 days old, e law of which it is organized. (If the certificat t be submitted)	duly authenticated by the c e is in a foreign language,	official having custody of records in the a translation of the certificate under oath				
10. This document is submitted in a docum	s executed in accordance with section 605.020; nent to the Department of State constitutes a th	ird degree felony as provid	I am aware that any false information led for in s.817.155, F.S.				
Signature of an authorized person							
	Sean McArthur						

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 <u>TORCSILL FOUNDATIONS</u>, <u>LLC</u> whose registered agent is <u>THE CORPORATION(COMPANY</u>, with its registered office at <u>1833 SOUTH MORGAN ROAD</u> <u>OKLAHOMA CITY 73128 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> 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 <u>17th</u>, day of <u>December</u>, <u>2020</u>.

Secretary Of State

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