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(((H21000214713 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC

Account Number: I20120000007

Phone

: (702)866-2500

Fax Number

: (702)866-2689

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

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documents@incorp.com

Foreign Limited Liability Company WB Pipeline, LLC

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COVER LETTER

O: Registration Section Division of Corporations							
UBJECT: WB Pipeline, 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.							
lease return all correspondence concerning this matter to the following:							
Desiree Miller							
Name of Person							
InCorp Services, Inc.							
Firm/Company							
3773 Howard Hughes Pkwy. · Suite 500S							
Address							
Las Vegas, NV 89169-6014							
City/State and Zip Code							
documents@incorp.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Desiree Miller on behalf of InCorp Services, Inc. at 800-246-2677							
Name of Contact Person Area Code Daytime Telephone Number							
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, 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 & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status Certified Copy Of Status & Certified Copy							

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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. WB Pipeline, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "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._Delaware 3 82-4254812 (Jurisdiction under the law of which foreign limited liability company is organized) 4. Upon Registration 13420 Kennedy Drive (Street Address of Principal Office) Splendora, TX 77372 Splendora, TX 77372 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. Name: 17888 67th Court North Office Address: Loxahatchee 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.

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Desiree Miller

on behalf of Incorp Services, Inc.

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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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: John T. Phillips	■Manager	Name: William B. Haines
☐Member	Address: 13420 Kennedy Drive	□Member	Address: 13420 Kennedy Drive
□Authorized	Splendora, TX 77372	□Authorized	Splendora, TX 77372
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□ Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager _.	Name:
□Member	Address;	□Member	Address:
□Authorized		□Authorized	<u> </u>
Person		Person	
□Other	Other	□Other	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 fellony as provided for in s.817.155, F.S.

Signature of an authorized person

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John T. Phillips

Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "WB PIPELINE, 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 TWENTY-EIGHTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WE PIPELINE, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2017.

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

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6633311 8300 SR# 20212194832 Authentication: 203316857

Date: 05-28-21