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Tallhassee, FL 32301 Phone: 850-558-1500
ACCOUNT NO. : I2000000195
REFERENCE : 426930 4304369
AUTHORIZATION: Smell derias
COST LIMIT : \$125.00
ORDER DATE : January 21, 2022
ORDER TIME : 9:47 AM
ORDER NO. : 426930-045
CUSTOMER NO: 4304369
FOREIGN FILINGS
NAME: QPS FLINT, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER:

CORPORATION SERVICE COMPANY

1201 Hays Street

COVER LETTER

TO:

Registration Section

ECT: _	e of Limited Liability Company		
		Company for Authorization to Transact Business in Florida," Certification for Certification of Certification	
return al	I correspondence concerning this matter t	to the following:	
	CLAUDIA G. SANTOS		
	Name of Person		
	QPS FLINT, LLC		
	·	Firm/Company	
	2800 POST OAK BLVD., SUITE 2600		
	Address HOUSTON, TX 77056		
	City/State and Zip Code		
	csantos@quantaservices.com		
		e used for future annual report notification)	
ther info	rmation concerning this matter, please ca	II:	
CLAUDIA G. SANTOS		713 985-6434 at ()	
	Name of Contact Person	at () Area Code Daytime Telephone Number	
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclas	ed is a check for the following amount:		

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 HABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: QPS FLINT, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI.C.") (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.") **DELAWARE** 76-0644271 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 4500 S. GARNETT ROAD, SUITE 100 2800 POST OAK BLVD., SUITE 2600 (Street Address of Principal Office) TULSA, OK 74146 HOUSTON, TX 77056 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CORPORATION SERVICE COMPANY Name: 1201 HAYS STREET Office Address: TALLAHASSEE 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. **CORPORATION SERVICE COMPANY** By:

manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: QUANTA ENERGY SERVICES, LLC Name: CLAUDIA G. SANTOS □ Manager □Manager 2800 POST OAK BLVD., SUITE 2800 POST OAK BLVD., SUITE Address: **■**Member □Member HOUSTON, TX 77056 HOUSTON, TX 77056 ☐ Authorized ■Authorized Person Person □Other □Other_____ □Other____ □Manager □Manager Name: _____ □ Member □Member Address: □ Authorized □ Authorized Person Person □Other ☐Other _____ Other____ □ Other □Manager Name: _____ □Manager Name: □Member Address: ☐Member Address: □ Authorized □ Authorized 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. Nonindexed 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.

Typed or printed name of signee

CLAUDIA G. SANTOS

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "QPS FLINT, 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-FOURTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QPS FLINT, LLC"

WAS FORMED ON THE TWENTY-THIRD DAY OF MAY, A.D. 2000.

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



Authentication: 202467770

Date: 01-24-22