M22000005734

(Requestor's Name)	
(Address)	
(in the second	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
(333237)	
Certified Copies Certificates of Status	
Consistence Filtra Officer	
Special Instructions to Filing Officer:	

Office Use Only



500383084125

2022 MAR 23 AMILLS

APPROVEU AND FILED

APR 1 4 2022 K. Brumbley

SUBMINISION DATE AS THE DATE

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

ACCOUNT NO. : I2000000195
REFERENCE : 567037 8225779
AUTHORIZATION Spelle man
COST LIMIT : \$125.00
ORDER DATE: March 22, 2022
ORDER TIME : 9:47 AM
ORDER NO. : 567037-005
CUSTOMER NO: 8225779
FOREIGN FILINGS
NAME: KING GEORGE FLEET SERVICES, 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: ____

COVER LETTER

TO:

Registration Section

Div	ision of Corporations	
SUBJECT:	KING GEORGE FLEET SERVIC	
		Name of Limited Liability Company
		iability Company for Authorization to Transact Business in Florida," Certificate of a above referenced foreign limited liability company to transact business in Florida.
Please return	all correspondence concerning this	matter to the following:
	PATRICIA TRUEX	
		Name of Person
	KING GEORGE FLEET SER	VICES, LLC
		Firm/Company
	3703 INDIAN SPRINGS TRI	
		Address
	ARLINGTON, TX, 76016	
		City/State and Zip Code
	TRISH.TRUEX@KINGGEOR	GE.US
	E-mail addre	ss: (to be used for future annual report notification)
For further in	formation concerning this matter, p	lease call:
PA [*]	TRICIA TRUEX	817 820-0881 EXT 1001 at ()
	Name of Contact Person	
Reg Div P.O	ling Address: gistration Section vision of Corporations b. Box 6327 lahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Plea	losed is a check for the following ar se make check payable to: FLORII 125.00 Filing Fee \$130.00 F Cer	DA DEPARTMENT OF STATE

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

IN COMPILANCE 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;

EXAS Jurisdiction under the law of v		orms. The another main most thereas. Ellined Elabini	y Company," "L.L.C," or "Ll
(Jurisdiction under the law of v		86-1790661 3	
	which foreign limited liability company is organized)	(FEI mumber, if	spplicable)
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.) ine penalty liability)	_
3703 INDIAN SPRIN	GS TRL	320 HEMPHILL STREET	
t Address of Principal Office)		6. (Mailing Address)	
ARLINGTON, TX, 76	6016	FORT WORTH, TX 76104	
	ss of Florida registered agent: (P.O. Box		202
			2022 HAR
Name and <u>street addre</u>	ss of Florida registered agent: (P.O. Box		2022 MAR 23
Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box Corporation Service Company		<i>∞</i> : N

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: Name: GEORGE F. BERNARD Name: JEFFREY SCOTT KING □ Manager Manager Address: _____ Address: ___ **■**Member **■**Member ARLINGTON, TX, 76016 FORT WORTH, TX 76104 Authorized □ Authorized Person Person Other____ Other____ □Other □Other_____ Name: _ SHERYL MORGAN Name: Jack Robinson Manager □Manager Address: _ Address: _ □ Member □Member FORT WORTH TX 76104 FORT WORTH TX 76104 **Authorized Authorized** Person Person Other____ □Other_ □Other □Other Name: PATRICIA TRUEX □ Manager Name: Address: ___ 320 HEMPHILL STREET □Member □Member Address: FORT WORTH TX 76104 □ 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

PATRICIA TRUEX

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for King George Fleet Services LLC (file number 803917153), a Domestic Limited Liability Company (LLC), was filed in this office on January 28, 2021.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 22, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State

TID: 10264

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services Document: 1132056420004