

11/18/24, 2:04 PM

Division of Corporations

**Florida Department of State**  
 Division of Corporations  
 Electronic Filing Cover Sheet  
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To:  
 Division of Corporations  
 Fax Number : (850)617-6383

From:  
 Account Name : COMPUTERSHARE  
 Account Number : 110432003053  
 Phone : (561)694-8107  
 Fax Number : (561)214-8442

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

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
 Group Petroleum Services, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

**RECEIVED**

09/18 NOV 18 PM 2:06

FLORIDA DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE  
 TALLAHASSEE, FL

2024 NOV 18 PM 4:42

**FILED**

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Group Petroleum Services, 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:

Olivia Hughes  
Name of Person

Casey's  
Firm/Company

One SE Convenience Blvd.  
Address

Ankeny, Iowa 50021  
City/State and Zip Code

olivia.hughes@caseys.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Faber at (515) 963-3802  
Name of Contact Person 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. Group Petroleum Services, 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.")

2. Texas 74-2776601
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. November 1, 2024
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6261 Central Pointe Parkway 6261 Central Pointe Parkway
(Street Address of Principal Office) (Mailing Address)
Temple, Texas 76502 Temple, Texas 76502

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

Name: United Agent Group Inc.
Office Address: 801 U.S. Highway 1
North Palm Beach 33408
(City) Florida (Zip code)

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.

Tymberlyn Teefey, Special Secretary
(Tymberlyn Teefey signature)
(Registered agent's signature)

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SECRETARY OF STATE
TALLAHASSEE, FL

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:**

Manager Name: Cascy's Services Company

Member Address: One SE Convenience Blvd.

Authorized Ankeny, Iowa 50021

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

Manager Name: Eric Larsen

Member Address: One SE Convenience Blvd.

Authorized Ankeny, Iowa 50021

Person \_\_\_\_\_

Other Treasurer.  Other \_\_\_\_\_

Manager Name: Brian Johnson

Member Address: One SE Convenience Blvd.

Authorized Ankeny, Iowa 50021

Person \_\_\_\_\_

Other President  Other \_\_\_\_\_

Manager Name: Scott Faber

Member Address: One SE Convenience Blvd.

Authorized Ankeny, Iowa 50021

Person \_\_\_\_\_

Other Secretary  Other \_\_\_\_\_

Manager Name: John Hostasa

Member Address: One SE Convenience Blvd.

Authorized Ankeny, Iowa 50021

Person \_\_\_\_\_

Other Vice-President  Other \_\_\_\_\_

Manager Name: Doug Beech

Member Address: One SE Convenience Blvd.

Authorized Ankeny, Iowa 50021


Person \_\_\_\_\_

Other Asst. Secretary  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

Scott Faber, Secretary

\_\_\_\_\_  
Typed or printed name of signer

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



Jane Nelson  
Secretary of State

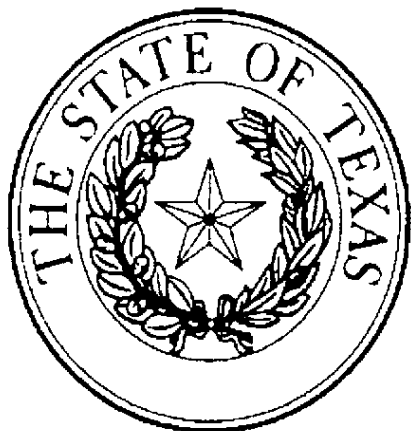
## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for GROUP PETROLEUM SERVICES, LLC (file number 805760930), a Domestic Limited Liability Company (LLC), was filed in this office on October 25, 2024.

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 November 15, 2024.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson  
Secretary of State