LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State
04-22-2002 90243 028 ****50.00

DOCUMENT # M96000000084

1. Entity Name

BSW Construction Services, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
One W. Third St.	One W. Third St..
Suite, Apt. #, etc.: Suite 100	Suite, Apt. #, etc.: Suite 100
City & State: Tulsa, OK	City & State: Tulsa, OK
Zip: 74103-3505 Country: USA	Zip: 74103-3505 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 73-1485401 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 660 E. Jefferson St.

City: Tallahassee, FL **FL** Zip Code: 32301

*8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	Manager
NAME	Jeffrey L. Stephens
STREET ADDRESS	One W. Third St., Suite 100
CITY-ST-ZIP	Tulsa, OK 74103-3505
TITLE	Manager
NAME	Frank R. Patton, Jr.
STREET ADDRESS	One W. Third St., Suite 100
CITY-ST-ZIP	Tulsa, OK 74103-3505
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Jeffrey L. Stephens 4/15/02 (918) 582-8771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #