CR2E083 (9/99)

DOCUMENT # N99000000379  1. Egity where a STEVART & STEVENSON TUG, LLC  SECRETARY OF STATE DIVISION UF CORPORATIONS  OU JUL 10 AM 9: 25  OU JUL 10	2000	UNIFO	ORM BU	SINESS REP	ORT	(UBI	R)				
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Principal Pace of Business 2707 MORTH LOOP WEST ATTN: LEGAL DEPARTMENT ATTN: LEGAL DEPARTME	1. Entity Name					_a≱5	٠ (	FILED SECRETARY OF STATE			
SUMMATURE  SCHAMING ADDITIONS SERVICE COMPANY  1201 HAYS STREET  TALLAHASSEE FL 32301-2525  SIGNATURE  MANAGING MEMBERS // MEMBERS /	SIEWANI	. O STEVEN	ISON TOG, L	1	<u> </u>	• 1c ¬_					
ATTN: LEGAL DEPARTMENT HOUSTON TX 77038	Principal Plac	e of Business		Mailing Address			····	00 JNF 10	AM 9: 25		
HOUSTON TX 77008 HOUSTON TX 77008-1061  2. Principal Place of Business Suite, Apt. 4, etc. Suite, Apt. 4, etc. Suite, Apt. 4, etc. City & State City	2707 NORTH	LOOP WEST		2707 NORTH LOOP WE	ST			. 1)			
2. Principal Place of Business								1 M			
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CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  City FL Zip Code  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  TOWNS Type or presed rame of ingitized upon and tis 1 agriculture agent ag	. Zip	Ì	Zip	Zip Countr				sired D	\$5.00 Add	itional	
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1201 HAYS STREET TALLAHASSEE FL 32301-2525  City						Name					
TALLAHASSEE FL 32301-2525    City   FL   Zip Code						Street Address (P.O. Box Number is Not Acceptable)					
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  Signature, byest or private name of registered agent and table 1 equication.  (NOTE Registered Agent signature required when rentrating)  DATE  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Department of State  9. MANAGING MEMBERS 10. ADDITIONS/CHANGES  STITLE ADDRESS CITY-11-12P  STEWART & Stieverison Services, Inc. 2707 North Loop West MG-R M GHRUN Addition waste street address city-11-12P  STEWART ADDRESS CITY-11-12P  ST											
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		ertify that the info	ormation/supplied	with his filling does not qualify			ted in Section 119	.07(3)(i), Florida Sta	atutes. I further cert	ify that the in	formation

11. pute this report as required by Chapter 608, Florida Statutes. limited liability company or the receiver or trustee empowers Stewarm & Stevenson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

713.868.7700

Daytime Phone #