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CSH SERVICES

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CSH SERVICES, LLC  
Account Number : 120070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

FLORIDA PROFIT/NON PROFIT CORPORATION

DELCO PIPELINE SERVICES, INC.

Certificate of Status	0
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4/22/08

4-08000103248-3

## **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### **ARTICLE I NAME**

The name of the corporation shall be:

DELCO PIPELINE SERVICES, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address is:

16501 MORRIS BRIDGE RD  
THONOTOSASSA, FLORIDA 33592

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

### **ARTICLE IV SHARES**

The number of shares of stock is:

1500 COMMON SHARES PAR VALUE \$0.01

### **ARTICLE V INITIAL OFFICERS / DIRECTORS**

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT, VICE-PRESIDENT, SECRETARY & TREASURER:

DELINDA D COOPER  
16501 MORRIS BRIDGE RD  
THONOTOSASSA, FLORIDA 33592

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PAGE 2 DELCO PIPELINE SERVICES, INC.

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

DOLORES SMITH

16501 MORRIS BRIDGE RD

THONOTOSASSA, FLORIDA 33592

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

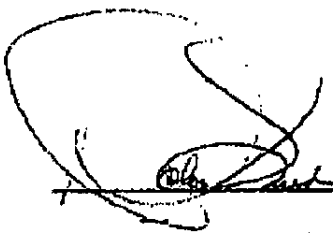
DELINDA D COOPER

16501 MORRIS BRIDGE RD

THONOTOSASSA, FLORIDA 33592

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*



DOLORES SMITH / REGISTERED AGENT

4/21/08

DATE

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DELINDA D COOPER / INCORPORATOR

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