

Submit in duplicate to:  
 Secretary of State  
 P.O. Box 13697  
 Austin, TX 78711-3697  
 512 463-5555  
 FAX: 512/463-5709  
 Filing Fee: \$750



**F I L E D**  
 In the Office of the  
 Secretary of State of Texas

MAY 23 2019

Corporations Section

1. The entity is a foreign limited liability company. The name of the entity is:

Texas Gulf Coast Header, LLC

Please note the full legal name of the entity as stated in the entity's formation documents will prevail over this name.

- 2A. The name of the entity in its jurisdiction of formation does not contain the words "limited liability company" or "limited company" (or an abbreviation thereof). The name of the entity with the word or abbreviation that it elects to add for use in Texas is:

- 2B. The entity name is not available in Texas. The assumed name under which the entity will qualify and transact business in Texas is:

The assumed name must include an acceptable organization identifier or an accepted abbreviation of one of these items.

3. Its federal employer identification number is: \_\_\_\_\_  
 Federal employer identification number information is not available at this time.  
 4. It is organized under the laws of: (see form state or foreign country): Delaware  
 and the date of its formation in that jurisdiction is: May 22, 2019.

5. As of the date of filing, the undersigned certifies that the foreign limited liability company currently exists as a valid limited liability company under the laws of the jurisdiction of its formation.

6. The purpose or purposes of the limited liability company that it proposes to pursue in the transaction of business in Texas are set forth below.

Any and all lawful business purposes

The entity also certifies that it is authorized to pursue such stated purpose or purposes in the state or country under which it is organized.

7. The date on which the foreign entity intends to transact business in Texas, or the date on which the foreign entity first transacted business in Texas is: Upon qualifications

8. The principal office address of the limited liability company is:

700 Milam Street, Suite 1900 Address	Houston City	TX State	77002 Zip Code
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Complete Item 9A or 9B, but not both. Complete Item 9C.

9A. The registered agent is an organization (name or entity named above) by the name of:

Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company

OR

9B. The registered agent is an individual resident of the state whose name is:

First Name M.I. Last Name Suffix

9C. The business address of the registered agent and the registered office address is:

<u>Street Address</u>	<u>Austin</u>	<u>TX</u>	<u>78701-3218</u>
	<u>City</u>	<u>State</u>	<u>Zip Code</u>

I, the entity hereby appoints the Secretary of State of Texas as its agent for service of process under the circumstances set forth in section 5.251 of the Texas Business Organizations Code.

11. The name and address of each governing person is:

**NAME AND ADDRESS OF GOVERNING PERSON** (use one form of either individual or organization for each)

IF INDIVIDUAL:

<u>First Name</u>	<u>M.I.</u>	<u>Last Name</u>	<u>Suffix</u>
<u>Douglas</u>		<u>Shurtliff</u>	

OR

IF ORGANIZATION:

<u>Organization Name</u>			
<u>700 Milam Street, Suite 1900</u>	<u>Houston</u>	<u>TX</u>	<u>USA 77002</u>
<u>Street or Mailing Address</u>	<u>City</u>	<u>State</u>	<u>Country Zip Code</u>

**NAME AND ADDRESS OF GOVERNING PERSON** (use one form of either individual or organization for each)

IF INDIVIDUAL:

<u>First Name</u>	<u>M.I.</u>	<u>Last Name</u>	<u>Suffix</u>
<u>Michael</u>	<u>J</u>	<u>Whitney</u>	

OR

IF ORGANIZATION:

<u>Organization Name</u>			
<u>700 Milam Street, Suite 1900</u>	<u>Houston</u>	<u>TX</u>	<u>USA 77002</u>
<u>Street or Mailing Address</u>	<u>City</u>	<u>State</u>	<u>Country Zip Code</u>

**NAME AND ADDRESS OF GOVERNING PERSON** (use one form of either individual or organization for each)

IF INDIVIDUAL:

<u>First Name</u>	<u>M.I.</u>	<u>Last Name</u>	<u>Suffix</u>

IF ORGANIZATION:

<u>Organization Name</u>			
<u>Street or Mailing Address</u>	<u>City</u>	<u>State</u>	<u>Country Zip Code</u>

### **Supplemental Provisions/Information**

**Very Alien:** [The attached *Wunderbar*, it may be memorized before its performance.]

#### **Effectiveness of Filing Space, either A, B, or C)**

- A.  This document becomes effective when the document is filed by the Secretary of State.

B.  This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: \_\_\_\_\_.

C.  This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90<sup>th</sup> day after the date of signing is: \_\_\_\_\_.

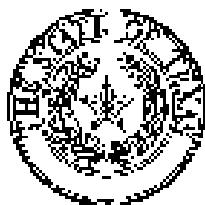
The following event or fact will cause the document to take effect in the manner described below:

## **Execution**

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entry to execute the filing instrument.

Date: May 22, 2019

  
\_\_\_\_\_  
**Sean N. Markowitz**  
\_\_\_\_\_  
Financial Analyst, Inc.



**Acceptance of Appointment  
and  
Consent to Serve as Registered Agent  
§5.201(b) Business Organizations Code**

The following form may be used when the person designated as registered agent is a registered agent filing is an individual.

**Acceptance of Appointment and Consent to Serve as Registered Agent**

I acknowledge, accept and consent to my designation or appointment as registered agent in Texas for

*Name of represented entity*

I am a resident of the state and understand that it will be my responsibility to receive any process, notice, or demand that is served on me as the registered agent of the represented entity; to forward such to the represented entity; and to immediately notify the represented entity and submit a statement of resignation to the Secretary of State if I resign.

*x:*

*Signature of registered agent*

*Title/Name of registered agent*

*Date (month/year)*

The following form may be used when the person designated as registered agent is a registered agent filing is an organization.

**Acceptance of Appointment and Consent to Serve as Registered Agent**

I am authorized to act on behalf of Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company  
*Name of organization designated as registered agent*

The organization is registered or otherwise authorized to do business in Texas. The organization acknowledges, accepts and consents to its appointment or designation as registered agent in Texas for:

**TEXAS GULF COAST HEADER, LLC**

*Name of represented entity*

The organization takes responsibility to receive any process, notice, or demand that is served on the organization as the registered agent of the represented entity; to forward such to the represented entity; and to immediately notify the represented entity and submit a statement of resignation to the Secretary of State if the organization resigns.

*x:* Dy:

*Signature of person authorized to act on behalf of organization*  
*Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company*

*Date Counter,*  
*Asst. Vice President*

*5/23/2019*

*Date (month/year)*