Filing Fee: \$150.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is:		
	LUFKIN INDUSTRIES, LLC		
	This company has been duly organized in its state of formation as a low-profit limited liability company. (Check box if applicable)		
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:		
3.	The limited liability company is organized under the laws of Texas		
4.	The date of its organization is 08/26/2013		
5.	The period of duration of the limited liability company is (if perpetual, so state) Perpetual		
6.	3. The address of the limited liability company's resident agent in Rhode Island is:		
	450 Veterans Memorial Parkway, Suite 7A East Providence, RI 02914		
	(Street Address, not P.O. Box) (City/Town) (Zip Code)		
	and the name of the resident agent at such address is CT Corporation System (Name of Agent)		
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.		
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:		
	601 S. Raguet Street, Lufkin, TX 75904		
	FII FD C		
9.	The mailing address for the limited liability company is:		
	601 S. Raguet Street, Lufkin, TX 75904 FEB 1 3 2014		
	Cu 217258		
	BY		

Form No. 450 Revised: 07/12

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10. Management of the Limited Lial	bility Company (check <u>one</u> only):
A. The limited liability company is a No. 11 - DO NOT LIST ANY N	to be managed by its members. (If you have checked this box, go to item
	<u>or</u>
B. The limited liability company i company has managers at t address of each manager.)	is to be managed 🔀 by one (1) or more managers. (If the limited liability the time of the filing of these Articles of Organization, state the name and
<u>Manager</u>	<u>Address</u>
Ian Milne	601 S. Raguet Street, Lufkin, TX 75904
Maria Khoury	601 S. Raguet Street, Lufkin, TX 75904
Jamere Jackson	601 S. Raguet Street, Lufkin, TX 75904
authorized officer of the jurisdiction	y a certificate of good standing duly authenticated by the secretary of state or other in under which the foreign limited liability company was organized. tration is to become effective, if later than the date of filing, is:
(not prior to, nor mor	e than 30 days after, the filing of this Application for Registration)
	Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments and that all statements contained herein are true and correct.
Date: 1-20-2014	LUFKIN INDUSTRIES, LLC Print Exact Name of Limited Liability Company Making Application
	By Victoria Cura Signature of Authorized Person
	Victoria Lazar

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



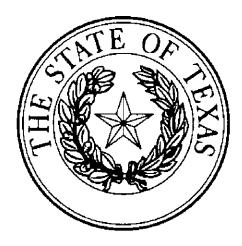
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for Lufkin Industries, LLC (file number 801840255), a Domestic Limited Liability Company (LLC), was filed in this office on August 26, 2013.

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 January 24, 2014.



NANDITA BERRY

Nandita Berry Secretary of State

(512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 526241820003



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

