

TEXAS COMPTROLLER OF PUBLIC ACCOUNTS

Comptroller.Texas.Gov

July 07, 2017

LMV & YIH SOUTH WEST LLC 6200 RENWICK DR APT 448 HOUSTON TX 77081-3878

Taxpayer number 32064189619

File number 0802757545

WebFile number FQ222027

Dear Taxpayer:

Congratulations on registering your business with the Texas Secretary of State. In addition to being the state's chief financial officer and tax collector, I am a strong advocate for growth in our economy, and my office plays an important role in ensuring businesses like yours continue to thrive in the state of Texas. Part of that responsibility is to be a resource when your business needs assistance.

Customer service is my top priority, and my staff is ready to help you with questions related to your business' state tax responsibilities. The agency website, www.comptroller.texas.gov, contains a wealth of resources about the various taxes we administer. There you can find publications, answers to frequently asked questions, tax rules, electronic reporting options and more. In the right hand corner of each page, there is a link to "contact us," where you will find information on how to reach us if you do not find your answer online.

The Secretary of State notified us that your company was recently registered with their office. The company you registered is subject to the franchise tax, which my office administers. Accordingly, we have created a franchise tax account based on the information you provided at the time of registration.

Please review and update your account information at your earliest convenience. Most important is to ensure the address we have on file is the address where your company wants to receive tax mailings from us.

To view and correct your account information, go to www.comptroller.texas.gov/taxes/file-pay/. If you have not used WebFile before, you will register as a new user, and there is a video to assist you with that process. When you are ready to get started, select the Franchise Tax Accountability Questionnaire under Other Electronic Reporting Tools. Select "continue to log in" at the bottom of the page to sign in. You will need the WebFile number located at the top of this letter.

The company's first franchise tax report is due on 05/15/2018. We will send you a reminder letter with filing instructions well before the due date. You can contact our office for assistance at 1-800-252-1381.

I appreciate the work you do and the contributions you make to Texas. I wish you the best of luck in all your business endeavors.

Sincerely,

Glenn Hegar

0002486

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



Rolando B. Pablos Secretary of State

Office of the Secretary of State Packing Slip

June 29, 2017 Page 1 of 1

Yasser Izquierdo Hernandez 6200 Renwick Dr #448 Houston, TX 77081

Batch Number: 74729416

Client ID: 601793399

Batch Date: 06-26-2017

Return Method: Mail

Oocument Detail	Number / Name	Page Count	Fee
Certificate of Formation	LMV & YIH SOUTH WEST LLC	0	\$300.00
	Total	Fees:	\$300.00
		Certificate of Formation LMV & YIH SOUTH WEST LLC	Occument Detail Number / Name Count Certificate of Formation LMV & YIH SOUTH WEST 0

Payment Type	Payment Status	Payment Reference		Amount
Check	Received	eceived 17607779349		\$300.00
Circu			Total:	\$300.00

Total Amount Charged to Client Account:

\$0.00

(Applies to documents or orders where Client Account is the payment method)

Note to Customers Paying by Client Account: This is not a bill. Payments to your client account should be based on the monthly statement and not this packing slip. Amounts credited to your client account may be refunded upon request. Refunds (if applicable) will be processed within 10 business days.

User ID: AHURTADO

Phone: (512) 463-5555

Come visit us on the Internet @ http://www.sos.state.tx.us/

FAX: (512) 463-5709

Dial: 7-1-1 for Relay Services

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



Office of the Secretary of State

CERTIFICATE OF FILING OF

LMV & YIH SOUTH WEST LLC

File Number: 802757545

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Liability Company (LLC) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 06/26/2017

Effective: 06/26/2017



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Rolando B. Pablos Secretary of State

Form 205 (Revised 05/11)

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

Filing Fee: \$300



Certificate of Formation Limited Liability Company

This space reserved for office use.

FILED
In the Office of the
Cecretary of State of Texas

JUN 26 2017

Corporations Section

Article 1 - Entity Name and Type

The filing entity being formed is a limited liability co	ompany. The name of the entity is:
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ine ming energy being formed is a r	mined naomi	y company. Th	le name of the chirt	y 13.	
LMV & YIH SOUTH WEST LLC					
The name must contain the words "limited liabi	lity company," "li	mited company," or	an abbreviation of one of	these phrase	S.
Article 2 – (See instruction A. The initial registered agent in	ns. Select and cor	agent and Reginplete either A or Betion (cannot be enti	and complete C.)	name of	
OR ⊠ B. The initial registered agent is YASSER	s an individua		e state whose name HERNANDEZ	is set for	th below:
	M.I.	Last Name	TIDIQ VI II VDEE	Sı	ıffix
C. The business address of the regis	tered agent ar	nd the registered	d office address is:		
6200 RENWICK DR # 448	HOUSTO	N	TX	77081	
Street Address	City		State	Zip Code	
(Select and complete either A		erning Author		son.)	
A. The limited liability company manager are set forth below.	y will have m	anagers. The na	ame and address of	each initi	al

GOVERNING PERSON 1					
NAME (Enter the name of either an individual of IF INDIVIDUAL	or an organization, b	ut not both.)			
YASSER	IZQUIERDO HERNANDEZ				
First Name	M.I.	Last Name			Suffix
OR					
IF ORGANIZATION					
Organization Name					
6650 DUNLAP ST #2104	F	HOUSTON	TX	USA	77074
Street or Mailing Address	(City	State	Country	Zip Code