APR 2 5 2016

FLE NO. R-208 7824-0

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACCUSE ONLY.

APPLICATION FOR REGISTRATION OF FOREIGN LIMITED LIABILITY COMPANY

Please read Instructions L025i

1.	ENTIT	ENTITY TYPE – check only one to indicate the type of entity applying for registration:								
		LIMIT	ED LIABILITY COMPANY	PROFESSIONAL LIMITED LIABILITY COMPANY						
2.		ME IN STATE OR COUNTRY OF FORMATION (FOREIGN NAME) — enter the exact, true ne of the foreign LLC:								
	United	d En	ergy Trading LLC							
3.				(ENTITY NAME) – identify the name the foreign LLC will .2 (check only one), and follow instructions:						
	3.1		Name in state or counumber 4 and continue	intry of formation, with no changes or additions – go to e.						
	3.2		formation is not available identifier, and enter the	eck this if the foreign LLC's name in its state or country of ole for use in Arizona or if that name does not contain an LLC e name in number 3.3 below. NOTE – a resolution of the fictitious name must be attached to and submitted with this						
	3.3	If	you checked 3.2, enter	or print the name to be used in Arizona:						
4.	in num	ber 1	ONAL LIMITED LIABIL above, describe the pro- law firm, accounting, m	LITY COMPANY SERVICES – if professional LLC is checked ofessional services that the professional LLC will provide edical):						
5.	FOREI North			te or country in which the foreign LLC was formed:						
6.	DATE	OF F	ORMATION IN FOREIG	GN DOMICILE: 09/03/2002						
7.	foreign	LLC	OR GENERAL CHARAC or the general character of motor fuels	TER OF BUSINESS – describe or state the purpose of the r of the business it proposes to transact in Arizona:						

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•	REQUIRED - give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			8.2 OPTIONAL - mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):				
egalInc (Corporate Se	rvices	Inc.	_				
editory rigini in	2 (+943 ==)				_			
ttention (optional				Attention (c	optional)			
ddress 1				Address 1				
ddress 2 (optiona		TA 7	T85701	Address 2 (optional)	_ 	<u></u>	
tv Tucso	•	AZ State	Zip	City		State	Zip	
8.3	<i>REQUIRED</i> - th this Application	ne <u>Stati</u> For Re	utory Agent Acce egistration.	ptance fo	rm M002 must l	oe submitte	ed along with	
	Attention (optional) 919 South Address 1 Suite 405	7th S	treet					
	Address 2 (optional)				τ			
	1				ND	158	8504	
	Bismarck	ED STAT	ES		State or Province	Zip		
10. OPTIC 10.1	Bismarck City Country UNIT Country UNIT	NA KN	NOWN PLACE Of busine ent?	ess street go to the	State or Province ESS ADDRESS: address the sai	zip me as the s continue.	street addres	
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COMPLETE NUMBER 11 OR NUMBER 12 - NOT BOTH.

12. MEMBER-MANAGED LLC - see Instructions L025i - check this box ■ if management of the LLC is reserved to the members, and complete and attach the Member Structure Attachment form L041. The filing will be rejected if it is submitted without the attachment. 13. SIGNATURE: By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compilance with Arizona law. □ I ACCEPT □ I ACCEPT □ I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named: □ I am a Member of this member-managed LLC. I am signing for an entity member named: □ I am a duly authorized agent for this LLC.	11.	MANAGER-MANAGED LLC – <u>see Instructions L025i</u> – check this box [] if management of the LLC is vested in a manager or managers, and complete and attach the <u>Manager Structure</u> <u>Attachment form L040</u> . The filing will be rejected if it is submitted without the attachment.							
of perjury that this document together with any attachments is submitted in compliance with Arizona law. I ACCEPT OCC. Printed Name Printed Name REQUIRED - check only one and fill in the corresponding blank if signing for an entity: I am the individual Manager of this manager-managed LLC or I am signing for an entity agent for this LLC. I am a Member of this member-managed LLC or I am signing for an entity manager of this LLC.	12.	LLC is reserved to the members, and complete and attach the Member Structure Attachment							
REQUIRED - check only one and fill in the corresponding blank if signing for an entity: I am the individual Manager of this manager-managed LLC or I am signing for an entity manager of this LLC. I am a Member of this member-managed LLC or I am signing for an entity member named: I am a duly authorized agent for this LLC.	13.	SIGNATURE:	of perjury tha	it this documen ith Arizona law	t together with an	I acknowledge y attachments	e <i>under penalty</i> s is submitted in		
I am the individual Manager of this manager-managed LLC or I am signing for an entity manager I am a Member of this member-manager of this member-managed LLC or I am signing for an entity member named: I am a Member of this member-manager of this member-managed LLC or I am signing for an entity member named:	Signatu	June American		Lore of Printed Name	Kopzena		4-21-2016 Date		
manager-managed LLC or I am managed LLC or I am signing for an signing for an entity manager entity member named:	REQU	REQUIRED - check only one and fill in the corresponding blank if signing for an entity:							
	m	anager-managed LLC ogning for an entity ma	r I am	managed LLC	or I am signing for ar	, 			

Filing Fee: \$150.00 (regular processing)	Mail:	Arizona Corporation Commission - Corporate Filings Section
Expedited processing – add \$35.00 to filing fee.	}	1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fax:	602-542-4100

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

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MEMBER STRUCTURE ATTACHMENT

1.	ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):
	United Energy Trading LLC
2.	A.C.C. FILE NUMBER (if known):
	Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations

3. MEMBERS – give the name and address of **all Members**. If more space is needed, use another <u>Member Structure</u> Attachment form.

1.			12.				
Loren Kopseng			Thomas Williams				
Name			Name				
919 South 7th Street			225 Un	<u>ion Boulevard</u>			
Suite 405			Suite 2	ന			
Address 2 (optional)			Address 2 (op				
Bismarck	ND	58504	Lakewo	od	co	80228	
Country UNITED STATES	State or Province	Zip	City Country	NITED STATES	State or Province	Zip	
Matthew Hurley			Ryan K	opseng			
Name			Name	uth 7th Ctroo	L		
20405 State Hwy 249	·· ····	*	919 501 Address 1	uth 7th Street	<u> </u>		
Suite 850			Suite 4				
Address 2 (optional)	TX	77070	Address 2 (op		ND	58504	
Houston	State or	Zip	Bismar	-K	State or	Zip	
Country UNITED STATES	Province	Zip	Country	NITED STATES	Province		
5.			6.				
			Name	·····			
Name			Name				
Address 1			Address 1				
Address 2 (optional)			Address 2 (op	tional)		<u> </u>	
City	State or	Zip	City _		State or Province	Zíp	
Country	Province		Country	Man	PTOVIRCE		
7.			8.				
Name			Name		 		
Address 1	Address 1						
Address 2 (optional)			Address 2 (op	tional)			
City	State or Province	Zip	City		State or Province	Zip	
Country	FIOVILLE		Country	- A			

L041.002 Rev: 2014

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STATUTORY AGENT ACCEPTANCE

	Please :	read II	nstructions <u>MUUZI</u>					
1.	ENTITY NAME – give the exact name in A Statutory Agent (this must match exactly the statutory agent, e.g., Articles of Organization United Energy Trading LLC	ie nam	e as listed on the document	nat has appointed the tappointing the				
2.	STATUTORY AGENT NAME – give the exacutity listed in number 1 above (this will be must match exactly the statutory agent na statutory agent (e.g. Articles of Incorporation initial or suffix:	either me as	an individual or an entity). Iisted in the document that	NOTE - the name appoints the				
	Legalinc Corporate Services Inc.							
3.	STATUTORY AGENT SIGNATURE: By the signature appearing below, the individuance accepts the appointment as statutory agent acknowledges that the appointment is effect agent or the statutory agent resigns, which agent or the statutory agent resigns, which are the person signing below declares and certical contained within this document together with submitted in compliance with Arizona law.	for the tive un ever oc ifies <i>ur</i>	e entity named in number 1 itil the appointing entity repocurs first. Index penalty of perjury that	above, and laces the statutory the information				
5187	naushe Daoch Ma	PSh	a Dasch	7.21.16				
RE	QUIRED - check only one:							
	Individual as statutory agent: I am signing on signing on behalf of myself as the individual (natural person) named as statutory agent, and I am authorized to act for that entity.							
) Ex	ng Fee: none (regular processing) pedited processing – not applicable. fees are nonrefundable - see Instructions.	Mail: Fax:	Arizona Corporation Commission 1300 W. Washington St., Phoenix 602-542-4100					
Manage	a ha a daland shap A A A Comma and an anti-the autility of a dalang manufacture.		da. Mari abarda asali antista tagal ancident fac	there were the age, and to				

Please be advised that A.C.C, forms reflect only the minimum provisions required by statute. You should seek private to the individual needs of your business.

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APR 2 5 2016

AREZGNA-GGRP: COMMISSION CORPORATIONS DIVISION

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ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

1. WHAT A	RE YOU FILING?					
✓ New Entity	☐ Change to	existing entity	Re-submission/Cor	rection		
2. ENTITY!	NAME:					
United Energy						
Officed Effergy	Trading LLC					·
3. CALCULA	TE YOUR FEES	copies, certificate of o	good standing and expedited	processing	are all option	al):
			form or on the fee sched		Subtotal:	\$150.00
	EXPEDITED proces			add \$35.00	Subtotal:	
☐ Corporation	n certified copies	\$ 5.00 each x	(enter number of copies	requested)	Subtotal:	
☐ LLC certifie	ed copies	\$10.00 each x	(enter number of copies	requested)	Subtotal:	
Certificate	of Good Standing	\$10.00 each x	(enter number of copies	requested)	Subtotal:	
TOTAL YOUR AN	OUNT OWED			TOTAL AMO	OUNT DUE:	
MOD Accordant Modern Mo	nail cash. Cash may be ey orders - must be n hecks must be complet inted or preprinted nan stamped names, addres may be used for in-pers	nade payable to "Ariz tely and properly fille the and address of the tises, or check numbe tison submittals, and f	on submittals. ona Corporation Commissic d out, including the amount e account holder; no imprin ers; temporary checks (new or online corporation annua	: sections, UN ted or prepri accounts). I reports, onl	NACCEPTABLE nted check n	CHECKS umber;
	· · · · · · · · · · · · · · · · · · ·		(PLEASE PRINT CLEA	RLY and s	elect only	ONE):
✓ Email	Email address: mlokke	n@uetllc.com	·		,	
Pick up	Name:			Phone:		
✓ Mail	Name: Matt Lokken	l				
	Address:PO Box 837					
	city: Bismarck		State: ND		Zip: 585	502
<u> </u>	Phone: (701) 214	-6462			· · · · · · · · · · · · · · · · · · ·	
DOCUMENTS V	WILL BE MAILED IF T	HEY ARE NOT PICK	CED UP IN A TIMELY MAN	INER (APPR	OXIMATELY	ONE WEEK)
	FOR.	ARIZONA CORPORA	TION COMMISSION USE	ONLY	r F	

View current processing times at: www.azcc.gov/Divisions/Corporations/document-processing-times.pdf

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