

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1299536.09

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Michael G. Adams Kentucky Secretary of State Received and Filed:

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Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 Certificate of Authority (Foreign Business Entity) **FBE**

(502) 564-3490 www.sos.ky.gov					
Pursuant to the provisions of and, for that purpose, submits	KRS 14A – 030 the undersigned he sthe following statements:	ereby applies for authority	to transact business in K	entucky on behalf of th	e entity named below
1. The entity is a: X pr	ofit corporation	nonprofit corporation	profe	ssional limited liability	company
	usiness trust	limited liability company		tory trust	
	nited partnership	Itd cooperative associati		c benefit corporation	
	on-profit lic	professional service corp	No.	•	
	11 (79 cm •) 10 cm · 11 (10 cm cm · · · · · · · · · · · · · · · · ·	professional service corp	oration other		
2. The name of the entity is Primoris Pipeline, Inc. (The name must be identical to the name on record with the Secretary of State.)					
	* * ACTIVITIES TO THE SECOND S		itil tile Secretary of Sta		
The name of the entity to t	be used in Kentucky is (if applicable)	(Only provide if "rea	I name" is unavailable f	or uso: otherwise lea	ve blank)
			I IIallie 15 ullavallable i	or use, otherwise, lea	ve blank.)
4. The state or country under	r whose law the entity is organized is		ad of direction in		
5. The date of organization is	4-3-2017	and the peri	od of duration is	k, duration is conside	red perpetual.)
6. The mailing address of the	e entity's principal office is		(II TOTE DIGITI	n, daration to conome	rou por potaun,
14455 Primoris Way	, , , , , , , , , , , , , , , , , , ,	Houston	TX	77048	
Street Address		City	Stat	te Zip Co	de
7 The street address of the	entity's registered office in Kentucky	ie		(*)	
421 West Main Street	entity's registered office in Rentucky	Frankfort	KY	40	601
Street Address (No P.O. Bo	x Numbers)	- I I I I I I I I I I I I I I I I I I I	City	State	Zip Code
Control of the Contro	ed agent at that office is Corporation	on Service Company			
The names and business a	addresses of the entity's representat	tives (secretary, officers a	nd directors, managers, tr	rustees or general partr	iers):
Ryan Palazzo	14455 Primoris Way	Houston	TX	77048	
Name	Street or P.O. Box	City	Stat	e Zip Co	de
John M. Perisich	14455 Primoris Way	Houston	TX	77048	<u> </u>
Name	Street or P.O. Box	City	Stat		
David Fehrenbach	14455 Primoris Way	Houston	TX		
Name	Street or P.O. Box	City	Stat	te Zip Co	de
9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.					
10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.					
11. If a limited partnership, it	elects to be a limited liability limited p	partnership. Check the b	ox if applicable:	·	
12. If a limited liability compa	any, check box if manager-manage	ed:			
13. This application will be eff	fective upon filing.			Al a	
7		John Perisich, Se	cretary	814 12033	
Signature of Authorized Repres	sentative	Printed Na		Date	-
Olgitata Con Additional Report				(
. Corporation Service Company					
, Corporation Service Company , consent to serve as the registered agent on behalf of the business entity. Type/Print Name of Registered Agent					
Corporation Service Company (Leohane Mulnes) Stephanie Milnes, Assistant VP 8/4/23					
By: Signature of Registered Agent	Print	ted Name	Title		Date

Kentucky Certificate of Authority Primoris Pipeline, Inc.

Item 8, Continued

Tom McCormick 14455 Primoris Way, Houston, TX 77048

Ken Dodgen 14455 Primoris Way, Houston, TX 77048