

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP),
Professional Associations (PA) and Financial Institutions

■ Tcode 13196 Franchise																								
■ Tax	payer r	number					·		·····	■ Re													and 559,	
3	3 2 0 7 6 9 9 4 2 6 1 2 Taxpayer name													Government Code, to review, request and correct info we have on file about you. Contact us at 1-800-25										
Тахра	ayer na	me L	iber	ty	Pavii	ng, LL	.C									-	O BI	acken circle	if the m	ailing	addres	s has cha	anged.	
Maili	ng add	ress 1	712	N I	Frazi	er Sui	ite 2	15									Secretary of State (SOS) file number or Comptroller file number							
City		or	roe			S	tate	TX	TX ZIP code plus 4 77301							0803857990								
\bigcirc 1	Blacker	n circle	f there	are	e curren	itly no ch	anges	from	previou	ıs year; if no	infor	mation	n is dis	playe	d, compl	lete the	applical	ole informat	ion in Se	ections	A, B ar	nd C.		
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Princ	pal pla	ce of bu	siness							oe, TX, 7														
You n	ust re									nanager inf			of th	e date	you con	nplete t	his repo	rt.						
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Please sign below! This report must be signed to satisfy franchise tax requirements. SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.																								
Name		e ar	nd mai	ling add	dress	of ead	ch offic	er, directo									m		d	d y	, y			
T-Rex Management Inc											General Partner							Term		Т		<u> </u>		
L	ng add								City							YES	expiratio State	n [ZIP Co				
17	12 N	Fraz	ui	te 21	5					Conroe								TX	m		7730			
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Maili	ng add	ress							City	City							State			ZIP Co	de 			
Name										Title	Title Director							Term	m	m	d	d y	/ y	
											YES							expiratio	n					
Maili	ng add	ress							City	City							State ZIP Code							
SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or m															or more.									
Name	of ow) co	rporatic	on, LLC, LF	P, PA or	financ	ial instit	ution	State of formation Texas SO								S file number, if any Percentage of ownership							
Name of owned (subsidiary) corporation, LLC, LP, PA or financial institutio											n State of formation						Texas SOS file number, if any				Percentage of ownership			
SECT	ION (E nte	er info	rma	ation f	or each	corpo	oratio	n , LLC	, LP, PA or	finar	ncial ir	nstitu	tion,	if any, tl	hat ow	ns an ir	iterest of 1	0 perc	ent or	more	in this	entity.	
Name	of ow	ned (pa	ent) co			LC, LP, PA y Rido			institutio	on		State	of forr	nation TX			Texas SO: 08	Percentage of ownership 100.000 Percentage of ownership						
				tere	d office	currently	on file		nstructio	ns if you nee	need to make changes) You must make a							a filing with the Secretary of State to change registered						
Agen						nt LLC					City						-	State TX						
Office The in						te 215		.203 o	f the Tax	Code for ea	Conroe e for each corporation, LLC, LP, PA or financial institution th													
sheets	for Se	ctions A	B and	C, if	necessa	ary. The in	forma	tion w	ill be ava	ailable for pu s is true and	ıblic in	spection	on.								-			
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