s Secretary of State Hope Andrade

Business Organizations | Trademarks | Help/Fees | BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY

Filing Number:

156126400

Entity Type:

Domestic For-Profit

Corporation

Original Date of Filing: December 14, 1999 Entity Status: In existence

Formation Date:

N/A

Tax ID:

17429390184

FEIN:

Duration:

Perpetual

Name:

BUTTROSS GROUP II, INC.

Address:

PO BOX 5396

Austin, TX 78763-5396 USA

REGISTERED AGENT

FILING HISTORY

NAMES

MANAGEMENT

ASSUMED

ASSOCIATED

Name

NAMES

ENTITIES

Inactive Date

Albert J Heinrich

Address

7901 Cameron Rd., Bldg. 3, Ste 100

Austin, TX 78754 USA

Return to Search

Instructions:

To place an order for additional information about a filing press the 'Order' button.



Business Organizations | Trademarks | Help/Fees | BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY

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Name:

BUTTROSS GROUP II, INC.

Address:

PO BOX 5396

Austin, TX 78763-5396 USA

REGISTERED AGENT	FILING HISTORY	NAMES	MANAGEN	MENT	ASSUMED NAMES	ASSOCIATED ENTITIES
Last Update	Name	Tit	le	Addı	ess	
May 13, 2009	DAVID A BUTT	TROSS SEC	CRETARY		OX 5396 TIN, TX 7876	3 USA
May 13, 2009	DAVID A BUTT	TROSS DIE	RECTOR		OX 5396 TIN, TX 7876	3 USA
May 13, 2009	DAVID A BUTT	TROSS TR	EASURER		OX 5186 TIN, TX 7876	3 USA
May 13, 2009	DAVID A BUT	TROSS PR	ESIDENT		OX 5396 TIN, TX 7876	3 USA
May 13, 2009	DAVID A BUTT Jr	TROSS PR	ESIDENT		OX 5396 TIN, TX 7876	3 USA

Return to Search

Instructions:

To place an order for additional information about a filing press the 'Order' button.



Business Organizations | Trademarks | Help/Fees | BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY

156126400 **Entity Type:**

Domestic For-Profit Corporation

Original Date of Filing: December 14, 1999 Entity Status: In existence

Formation Date:

Filing Number:

N/A

17429390184 Tax ID:

FEIN:

Duration:

Perpetual

Name:

BUTTROSS GROUP II, INC.

Address:

PO BOX 5396

Austin, TX 78763-5396 USA

REGISTERED AGENT	FILING HISTORY	NAMES	MANAGE	EMENT	ASSUMED NAMES	ASSOCIATED ENTITIES
Assumed Name		Date of Filing	Expiration Date	Inactive Date	Name Status	Counties
Buttross Motors		December 20, 2002	December 20, 2012		Active	*
BAM		February 15, 2008	February 15, 2018		Active	All Counties

Return to Search

Instructions:

To place an order for additional information about a filing press the 'Order' button.

ARTICLES OF INCORPORATION

OF

BUTTROSS GROUP II, INC.

In the Office of the Socretary of State of Texes

DEC 1 4 1999

ARTICLE ONE

The name of the corporation is Buttross Group II, Indexporations Section

ARTICLE TWO

The period of its duration is perpetual.

ARTICLE THREE

The purpose or purposes for which the corporation is organized are:

The transaction of any or all lawful business for which corporations may be incorporated under the Texas Business Corporation Act.

To deal in all kinds of real and personal property subject to Part Four of Texas Miscellaneous Corporation Laws Act.

To engage in such businesses and to do all other things necessary as are related to or allied with the purposes herein set forth.

ARTICLE FOUR

The aggregate number of shares which the corporation shall have authority to issue is 100,000 with no par value.

ARTICLE FIVE

The corporation will not commence business until it has received for the issuance of its shares consideration of the value of One Thousand and No/100 Dollars (\$1,000.00) consisting of money, labor done or property actually received.

ARTICLE SIX

The address of its registered office is 4408 Spicewood Springs Road, Austin, Texas 78759 and the name of its registered agent at such address is Charles J. Young.

ARTICLE SEVEN

The initial director's name and address is:

David A. Buttross P. O. Box 5186 Austin, Texas 78763

The name and address of the incorporator is:

Charles J. Young Richey & Young, P.C. 4408 Spicewood Springs Road, Suite 100 Austin, Texas 78759

IN WITNESS WHEREOF, I have hereunto set my hand this the 14th day of December, 1999.

Charles J. Young

00000009 .22200

The Buttross Group, Inc. 5818 Balcones #202 Austin, Texas 78735

December 14, 1999

Secretary of State Corporate Division P.O. Box 13697 Austin, Texas 78711-3697

Re: Use of Corporate Name

Dear Sir/Madam:

The board of directors of The Buttross Group, Inc., a Texas corporation, have authorized Charles J. Young as incorporator to file articles of incorporation for a new Texas corporation to be named Buttross Group II, Inc., and authorized said use of a name similar to The Buttross Group, Inc.

Sincerely,

David A. Buttross,

President

DAB/wb



Office of the Secretary of State Corporations Section P.O. Box 13697 Austin, Texas 78711-3697 FILED in the Office of the secretary of State of Texas

OCT 2 1 2002

Corporations Section

	CHANGE OF REGISTERED AGENT/REGISTERED OFFICE
١.	The name of the entity is Buttross Group II, Inc.
	and the file number issued to the entity by the secretary of state is 01561264
2.	The entity is: (Check one.)
	a business corporation, which has authorized the changes indicated below through its board of directors or by an officer of the corporation so authorized by its board of directors, as provided by the Texas Business Corporation Act.
	a non-profit corporation, which has authorized the changes indicated below through its board of directors or by an officer of the corporation so authorized by its board of directors, or through its members in whom management of the corporation is vested pursuant to article 2.14C, as provided by the Texas Non-Profit Corporation Act.
	a limited liability company, which has authorized the changes indicated below through its members or managers, as provided by the Texas Limited Liability Company Act.
	a limited partnership, which has authorized the changes indicated below through its partners, as provided by the Texas Revised Limited Partnership Act.
	an out-of-state financial institution, which has authorized the changes indicated below in the manner provided under the laws governing its formation.
	The registered office address as PRESENTLY shown in the records of the Texas
	secretary of state is 4408 Spicewood Springs Rd #100; Austin, Tx 78759
•	A. The address of the NEW registered office is: (Please provide street address, city, state and zip code. The address must be in Texas.)
	1400 West Anderson Lane; Austin, Texas 78757
R	B. The registered office address will not change.
	The name of the registered agent as PRESENTLY shown in the records of the Texas
	secretary of state is Charles J. Young
5.	A. The name of the NEW registered agent is
OR	B. The registered agent will not change.

Following the changes shown above, the address of the registered office and the address of the office of the registered agent will continue to be identical as required by law.

(A person authorized to sign on behalf of the entity)

INSTRUCTIONS

- It is recommended that you call (512) 463-5555 to verify the information in items 3 and 5
 as it currently appears on the records of the secretary of state before submitting the
 statement for filing. You also may e-mail an inquiry to <u>corpinfo@sos.state.tx.us</u>. As
 information on out-of-state financial institutions is maintained on a separate database, a
 financial institution must call (512) 463-5701 to verify registered agent and registered
 office information. If the information on the form is inconsistent with the records of this
 office, the statement will be returned.
- You are required by law to provide a street address in item 4 unless the registered office is located in a city with a population of 5,000 or less. The purpose of this requirement is to provide the public with notice of a physical location at which process may be served on the registered agent. A statement submitted with a post office box address or a lock box address will not be filed.
- 3. An authorized officer of the corporation or financial institution must sign the statement. In the case of a limited liability company, an authorized member or manager of a limited liability company must sign the statement. A general partner must sign the statement on behalf of a limited partnership. A person commits an offense under the Texas Business Corporation Act, the Texas Non-Profit Corporation Act or the Texas Limited Liability Company Act if the person signs a document the person knows is false in any material respect with the intent that the document be delivered to the secretary of state for filling. The offense is a Class A misdemeanor.
- Please attach the appropriate fee:

Business Corporation	\$15.00
Financial Institution, other than Credit Unions	\$15.00
Financial Institution that is a Credit Union	\$ 5.00
Non-Profit Corporation	\$ 5.00
Limited Liability Company	\$10.00
Limited Partnership	\$50.00

Personal checks and MasterCard®, Visa®, and Discover® are accepted in payment of the filing fee. Checks or money orders must be payable through a U.S. bank or other financial institution and made payable to the secretary of state. Fees paid by credit card are subject to a statutorily authorized processing cost of 2.1% of the total fees.

5. Two copies of the form along with the filing fee should be mailed to the address shown in the heading of this form. The delivery address is: Secretary of State, Statutory Filings Division, Corporations Section, James Earl Rudder Office Building, 1019 Brazos, Austin, Texas 78701. We will place one document on record and return a file stamped copy, if a duplicate copy is provided for such purpose. The telephone number is (512) 463-5555, TDD: (800) 735-2989, FAX: (512) 463-5709.

(3ev.2-02/20)	в в.	-	Do not write in t	02180	30454
a T Code = 13196		c. Taxpayer ide	enblication number		Report year
TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT MUST be filed with your Corporation Franchise Tax Report		■ 1-74	-2939018-4	•	2002
Coppiabee name and address			e. PIR / IND	1, 2, 3,	4 .
PO BOX 5396				State file nur siler uncharie	mber or, if none, red number
AUSTIN TX 7876	3-5396		Non-Con-Standburg	9 =	(=
			Item k on Franchise Tax Report form, Pa	ge 1 015	61264-00 1
The following information MUST be provided for the Secretary of State (company that files a Texas Corporation Franchise Tax Report. The info	rmation will be avai	lable for public ii	nspection.		
"SECTION A" MUST BE COMPLETE AND ACCURATE. If preprinted information is not correct, please type or print the correct in	formation, Ple	ase sign	relow!		
Blacken this circle completely if there are currently no changes to the	he information prep	rinted in Section	s A, B, and C of the	s report.	
Corporation's principal office					7.
Principal place of business				AND PROPERTY OF	10
SECTION A. Name, title and mailing address of each officer and direct	tor. Use additional			Coolel Canu	rity No. (Optional)
David A. Buttross Jr.		Preside	1	30CIRI 3400	nty No. (Opponiar)
MAJUNG ADDRESS	TV 101			Expir	ation date (mm-dd-yyyy)
P.O. Box 5396; Austin,	~ 101	MITLE	DIRECTOR	Social Secu	nty No. (Optional)
Mavid A. Buttross Sr.		VP	X YES		
P. O. BOX 5186; Austin,	TX 78	163		Expir	ation date (mm-oc-yyyy)
NAME.	(1- 10	TITLE	DIRECTOR.	Social Secu	rity No. (Optional)
David A. Buttross Jr.		Secreta	Y X YES	I Eval	ation date (mm-dd yyyy)
P.O. BOX 5396; Austin,	TX 787	63		Expir	audit date (min-oc yyyy)
NAME:		TITLE	DIRECTOR	Social Secu	rity No. (Optional)
David A. Buttross Sr.		Treasure	r AYES	Expir	ation date (mm-da-yyyy)
P.O. Box 5186; Austin	TX 78	763		.1	
NAME :		TITLE	PES	Social Secu	rity No. (Optional)
MAILING ADDRESS			1 1159	Expri	ation date (mm·od·yyyy)
				i	0.728
SECTION B. List each corporation or limited liability company, if any, if percent (10%) or more. Enter the information requested	n which this reporting for each corporation	ng corporation o	r limited liability con al sheets, if necess	npany own: ary.	an interest of ten
Name of owned (subsidiary) corporation		ncorporation	Texas S.O.S. file n		Percentage Interest
Name of owned (subsidiary) corporation	State of i	ncorporation	Texas S.O.S, file n	umber	Percentage Interest
SECTION C. List each corporation or limited liability company, if any, I	hat owns an intere	st of len percent	(10%) or more in th	nis reporting	corporation or limited
hability company. Enter the information requested for ea	ch corporation or li	mited liability cor incorporation	Texas S.O.S. Ne n	nai sheets,	f necessary. Percentage Interest

Registered eyent and registered office currently on file. (Changes must be filed se	parately with the Secr	etary of State.)			
Agent: CHARLES J YOUNG Office: 4408 SPICEWOOD SPRINGS ROAD				e and the property of	
AUSTIN, TX 78759				this informa	ou need forms ation.
I de une that the information in this document and any attachments is true and co	rect to the best of my	knowledge and be	ekef and that a copy of	this report h	as been mailed to each
person named in this report who is an officer or director and who is not currently or theer, director, or other authorized person	improyed by this corpo	Date			(Area code and number)
5 1 1 1	esident	6-1	9-02 (512)3	20-0888
			- N	-	0371741



Office of the Secretary of State Corporations Section P.O. Box 13697 Austin, Texas 78711-3697

FILED In the Office of the Secretary of State of Texas

UEC 2 0 2002

Corporations Section

ASSUMED NAME CERTIFICATE FOR FILING WITH THE SECRETARY OF STATE

registered limited liability partnership as stated in its articles of incorporation, articles of organization, certificate of limited partnership, application for certificate of
authority or comparable document is Buttross Group II, Inc.
The assumed name under which the business or professional service is or is to be conducted or rendered is
Buttross Motors
The state, country, or other jurisdiction under the laws of which it was incorporated,
organized or associated is Texas and the
address of its registered or similar office in that jurisdiction is
1400 West Anderson Lane Austin, Texas 78757
The period, not to exceed 10 years, during which the assumed name will be used is
10 Years
The entity is a (check one): A. Business Corporation Professional Corporation Professional Association
Limited Liability Company Limited Partnership Registered Limited Liability Partnership
B. If the entity is some other type business, professional or other association that is incorporated, please specify below (e.g., bank, savings and loan association, etc.)
If the entity is required to maintain a registered office in Texas, the address of the
registered office is 1400 West Anderson Lane, Austin, Texas 78757
and the name of its registered agent
at such address is Charles J. Young
The address of the principal office (if not the same as the registered office) is
Same as Registered Office

nagagananggan agangarata aganara	to or does not maintain a registered office in Texas, the
and if the entity is not incor	rporated, organized or associated under the laws of Texas.
the address of its place of bu	usiness in Texas is
and the office address elsew	here is
	ere business or professional services are being or are to be nder such assumed name are (if applicable, use the LEXCEPT")
Travis County	
	By Signature of officer, general partner, manager, representative or attorney-in-fact of the entity.

NOTE

This form is designed to meet statutory requirements for filing with the secretary of state and is not designed to meet filing requirements on the county level. Filing requirements for assumed name documents to be filed with the county clerk differ. Assumed name documents filed with the county clerk are to be executed and acknowledged by the filing party, which requires that the document be notarized.

Form No. 503 Revised 9/99

05-102 (Rev.2-03/21)	:	333	3	ь. =	03	3275	390130
a.T Code = 13196	24.5		1000	10.00	Do not write	in the spa	ce above
TEXAS FRANCHISE PUBLIC INFORMAT MUST be filed to satisfy franch	ION REPORT				dentification number 4-2939018-		d. Report year 2003
PO BOX 53	GROUP II INC				20070	nptroller un g	2, 3, 4 file number or, if none, chartered number 01561264-00
The following information MI company that files a Texas (The information will be available the preprinted information	Corporation Franchise Te	x Report. Use addition	nal sheets for	Sections A. B. ar	nd C. if necessary		, , , , , , , , , , , , , , , , , , , ,
O Blacken this circle com	pletely if there are curren	tly <u>no changes</u> to the i	information p	eprinted in Section	ons A, B, and C o	this repo	rt.
Corporation's principal office	1400 W.	Anderson	inj	Austin	,TX 7	1875	7
Principal place of business	1400 W	Anderson	in;	Austin	,TX -	1875	7
SECTION A. Name, title, a	nd masling address of ea	ch officer and director					
DAVID A BUTTROS	S JR			PRESIDEN	-	s	Security No. (Optional) Term expiration(mm-cd-yyyy)
PO BO	x 5396 AUSTIN,	TX 78763		TITLE.	DIRECTO	R - Social	Security No. (Optional)
DAVID A BUTTROS	S SR			: VICE PRE	SI YE	-	Term expiration(mm-ad-yyyy)
PO BO	X 5186 AUSTIN,	TX 78763		TITLE:	DIRECTO	R Social	Security No. (Optional)
DAVID A BUTTROS	S JR			SECRETAR	YE YE		Term expiration(mm-dd-yyyy)
PO BO	x 5396 AUSTIN,	TX 78763		[TITLE]	DIRECTO	R Social	Security No. (Optional)
MAIUNG ADDRESS		9.6		TREASURE	R YE		Term expiration(mm-do-yyyy
PO BO	X 5186 AUSTIN,	TX 78763		TITLE!	DIRECTO		Security No. (Optional)
MAILING ADDRESS	10 55	TV 707/2		DIRECTOR	: X YE		Term expiration (mm-dd-yyyy)
SECTION B. List each cor		company, if any, in w				company	owns an interest of ten
he he of owned (subsidiary) co) or more. Enter the info peration	imation reducestors for		d incorporation	Texas SOS No	number	Percentage Interest
Figure of owned (subsidiary) con	poratón		State	f incorporation	Texas SOS file	number	Percentage Interest
SECTION C. List each cer	poration or limited liability any. Enter the information					n this rep	orting corporation or limited
Name of owning (parent) corpor		Trequestes of open		if incorporation	Texas SOS No	number	Percentage Interest
Registered agent and registered Agent CHARLES J Y Fince: 1400 WEST A AUSTIN, TX	OUNG NDERSON LANE	instructions of year land to	o make change	s.)		this circle ge this inf	e if you need forms formation.
in that the information in	this document and any attac	hments is true and correct who is not currently empl	t to the best of oyed by this co	ny knowledge and l porabon or limited i	pelief and that a cop	y of this rep	port has been mailed to each reporation.
	the authorited person	- 24	siden	Date	29-03		phone (Area code and number) 320 - 0888



Office of the Secretary of State Corporations Section P.O. Box 13697 Austin, Texas 78711-3697 FILED
In the Office of the
Secretary of State of Texas

DEC 17 2003

Corporations Section

	CHANGE OF REGISTERED AGENT/REGISTERED OFFICE
i.	The name of the entity is Buttross Group II Inc.
	and the file number issued to the entity by the secretary of state is 01561264
2.	The entity is: (Check one.)
	a business corporation, which has authorized the changes indicated below through its board of directors or by an officer of the corporation so authorized by its board of directors, as provided by the Texas Business Corporation Act.
	a non-profit corporation, which has authorized the changes indicated below through its board of directors or by an officer of the corporation so authorized by its board of directors, or through its members in whom management of the corporation is vested pursuant to article 2.14C, as provided by the Texas Non-Profit Corporation Act.
	a limited liability company, which has authorized the changes indicated below through its members or managers, as provided by the Texas Limited Liability Company Act.
	a limited partnership, which has authorized the changes indicated below through its partners, as provided by the Texas Revised Limited Partnership Act.
	an out-of-state financial institution, which has authorized the changes indicated below in the manner provided under the laws governing its formation.
3.	The registered office address as PRESENTLY shown in the records of the Texas
	secretary of state is 1400 West Anderson lane, Austin, Tx 78757
4.	A. The address of the NEW registered office is: (Please provide street address, city, state and zip code. The address must be in Texas.)
	408 West 18th St Austin, TX 78701
OR	B. The registered office address will not change.
5.	The name of the registered agent as PRESENTLY shown in the records of the Texas
	secretary of state is Charles J. Young
6.	A. The name of the NEW registered agent is Albert J. Heinrich, Attorney
OR	B. The registered agent will not change.

Following the changes shown above, the address of the registered office and the address
of the office of the registered agent will continue to be identigal, as required by law.

By: (A person authorized to sign on behalf of the entity)

INSTRUCTIONS

- 1. It is recommended that you call (512) 463-5555 to verify the information in items 3 and 5 as it currently appears on the records of the secretary of state before submitting the statement for filing. You also may e-mail an inquiry to <u>corpinfo@sos.state.tx.us</u>. As information on out-of-state financial institutions is maintained on a separate database, a financial institution must call (512) 463-5701 to verify registered agent and registered office information. If the information on the form is inconsistent with the records of this office, the statement will be returned.
- You are required by law to provide a street address in item 4 unless the registered office is located in a city with a population of 5,000 or less. The purpose of this requirement is to provide the public with notice of a physical location at which process may be served on the registered agent. A statement submitted with a post office box address or a lock box address will not be filed.
- 3. An authorized officer of the corporation or financial institution must sign the statement. In the case of a limited liability company, an authorized member or manager of a limited liability company must sign the statement. A general partner must sign the statement on behalf of a limited partnership. A person commits an offense under the Texas Business Corporation Act, the Texas Non-Profit Corporation Act or the Texas Limited Liability Company Act if the person signs a document the person knows is false in any material respect with the intent that the document be delivered to the secretary of state for filing. The offense is a Class A misdemeanor.
- 4. Please attach the appropriate fee:

Business Corporation	\$15.00
Financial Institution, other than Credit Unions	\$15.00
Financial Institution that is a Credit Union	\$ 5.00
Non-Profit Corporation	\$ 5.00
Limited Liability Company	\$10.00
Limited Partnership	\$50.00

Personal checks and MasterCard®, Visa®, and Discover® are accepted in payment of the filing fee. Checks or money orders must be payable through a U.S. bank or other financial institution and made payable to the secretary of state. Fees paid by credit card are subject to a statutorily authorized processing cost of 2.1% of the total fees.

5. Two copies of the form along v th the filing fee should be mailed to the address shown in the heading of this form. The delivery address is: Secretary of State, Statutory Filings Division, Corporations Section, James Earl Rudder Office Building, 1019 Brazos, Austin, Texas 78701. We will place one document on record and return a file stamped copy, if a duplicate copy is provided for such purpose. The telephone number is (512) 463-5555, TDD: (800) 735-2989, FAX: (512) 463-5709.

Form No. 401 Revised 9.99

Do not write in the space above

13196

This report MUST be filed to satisty franchise tax requirements

c. Taxpayer identification number 1-74-2939018-4 d. Report year 2005

TEXAS FRANCHISE	TAX PUBLIC	INFORMATION	REPORT
-----------------	------------	-------------	--------

Corporation name and address

Harlinghanddlandld BUTTROSS GROUP II INC PO BOX 5396

APEZ-E4787 XT NITZUA

e. PIR / IND

Secretary of State file number or, if none, Comptroller unchartered number g. B

item k on Franchise Tex Report, Form 05-142 0156126400

information is reported

If the preprinted information is not correct, please type or print the correct information.

The following information MUST be provided for the Secretary of State (SOS) by each corporation or limited liability company that files a Texas Corporation Franchise Law Report. Use additional sheets for Sections A. B. and C. if necessary. The information will be available for public inspection.

Please sign below! Officer and director

as of the date a Public Information Report is completed. The information is updated annually as part of the tranchise tax report. There is no requirement or procedure for supplementing the information as officers and directors change

Blacken this circle completely if there are currently no changes to the information preprinted in Section A of this report. Then, complete Sections B and C.

1905 N Lamar \$ 200; Austin, TX 78	705
Principal place of business 1905 N Lamour # 200; Austin, TX -	
SECTION A. Name, title, and mailing address of each officer and director.	TITLE
DAVID A BUTTROSS JR	PRESIDE
MAILING ADORESS	
PO BOX 5396 AUSTIN, TX 78763	
	1.45 41.76

DIRECTOR	Term expiration (mm-dd-yyyy)
YES	A STATE OF THE PROPERTY OF THE PARTY OF THE

DAVID A BUTTROSS JR	PRESIDENT YES
MAILING ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PO BOX 5396 AUSTIN, TX 78763	
NAME	TITLE DIRECTOR Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS JR	SECRETARY YES
MAILING ADDRESS	Adam'anaka
PO BOX 5396 AUSTIN, TX 78763	
NAME	TITLE DIRECTOR Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS SR .	VICE PRESI YES
MAILING ADDRESS	
PO BOX 5186 AUSTIN, TX 78763	
NAME	TITLE DIRECTOR: Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS SR	TREASURER YES
MAILING ADDRESS	
PO BOX 5186 AUSTIN, TX 78763	
NAME	DIRECTOR: Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS JR	DIRECTOR X YES
MAJUNG ADDRESS:	

PO BOX 5396 AUSTIN, TX 78763 List each corporation or limited hability company, if any, in which this reporting corporation or limited liability company owns an interest of ten SECTION B. percent (10%) or more. Enter the information requested for each corporation or limited liability company.

Name of owned (subsidiary) corporation	State of incorporation	Texas SOS file number	Percentage Interest
Not the covered (subsidiary) corporating	State of incorporation	Texas SOS file number	Percentage Interest

SECTION C. List each corporation or limited liability company, if any, that owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company.

Name of owning (parent) corporation	State of incorporation	Texas SOS file number	Percentage Interest
Registered agent and registered office currently on the, (See instructions if your	ecd to make changes.)		

C 1 :0: 408 WEST 18TH ST AUSTIN, TX 78701

Blacken this circle if you need forms to change this information. Changes can also be made on-line at http://www.sos.state.tx.us/corp/sosda/index.shtml

ic= 0	21.1 the information in this	roment and any attachments is books.	d contact to t and who is n	e best of my knowledge and belief, as of the da of currently employed by this corporation or limit	
et n	Dilices, director, or other	illibratized person . 1	0 3	Date .	Daytime phone (Area code and numb

h el resident

6-29-2005

(512)320-0888

⊛ ≡		5-102 2-05/25)
a. T Code	=	13196

This report MUST be filed to satisfy franchise tax requirements Do not write in the space above

c. Taxpayer identification number

1-74-2939018-4

d. Report year 2006 90

W

D

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

Corporation name and address

BUTTROSS GROUP II INC PO BOX 5396 APEZ-EATAT XT NITZUA



1e. PIR / IND 0 (i) Secretary of State file number or, if none, Comptroller unchartered number g. 🖿 Item k on Franchise 0156126400 Tax Report, Form 05-142

Lease sign below! Officer and director

Please mark through any incorrect information, and type or print the correct information.

The following information MUST be provided for the Secretary of State (SOS) by each corporation or limited liability company that files a Texas Corporation Franchise Texas Corporation Sections A, B, and C, if necessary, The information will be available for public inspection.

Blacken this circle completely if there are currently no changes to the information preprinted in



1	Section A of this report. Then, complete Sections B and C.
Co	poration's principal office
Pr	cinal place of business

information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the

SECTION A. Name, title, and mailing address of each officer and director.	throughout the year.
DAVID A BUTTROSS JR	PRESIDENT VES Term expiration (mm-dd-yyyy)
MAJUNG ACCRESS	1101120
PO BOX 5396 AUSTIN, TX 78763	
NAME	TITLE DIRECTOR Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS JR	SECRETARY YES
MAILING ADDRESS	
PO BOX 5396 AUSTIN, TX 78763	
NAME:	TITLE DIRECTOR Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS SR	VICE PRESI V YES
MAILING ADDRESS	
PO BOX 5186 AUSTIN, TX 78763	
NAME	TITLE CIRECTOR Term expiration (rnm-dd-yyyy)
DAVID A BUTTROSS SR	TREASURER YES
MALING ADDRESS	
PO BOX 5186 AUSTIN, TX 78763	
NA 9	TITLE DIRECTOR Term expiration (mm-dd-yyyy)
DAVID A BUTTROSS JR	DIRECTOR X YES
MAILING ADDRESS	
PO BOX 5396 AUSTIN, TX 78763	

List each corporation or limited Fability company, if any, in which this reporting corporation or limited liability company owns an interest of ten percent (10%) or more. Enter the information requested the each corporation or limited liability company.

State of inc./organization	Texas SOS file number	Percentage Interest
State of inc./organization	Texas SOS file number	Percentage Interest

List each corporation or limited limited limited limited corporation or limited to bally company, it is not owns an interest of ten percent (10%) or more in this reporting corporation or limited liability company. Enter the information requested for each corporation or limited liability company.

to the discovering (parent) corporation or limited liability company	State of inc./organization	Texas SOS file number	Percentage Interest
Research agent and registered office currently on file. (See instructions if you ALBERT J HEINRICH	need to make changes.)		
408 WEST 18TH ST		Blacken this circle if you n	

USTIN, TX 78701	Blacken this circle if you need forms to change this information. Changes can also be made on-line at http://www.sos.state.tx.us.corp.sosda.index.shtm

 First the information in this document and any attachments is the First pleach person named in this report where an officer or dis- 		best of my knowledge and belief, as of the date below, and that a copy of this report has a not currently employed by this, or a related, corporation or limited liability company.			
Crifices, director, or other authorized purses	1127	121341	11-27-06	512 320 - 68 88	
1 GUE		201	11-21-06	0000	

Form 401 (Revised 01/06)

Return in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512/463-5709 Filing Fee: See instructions



Statement of Change of Registered Office/Agent

This space reserved for office use.

In the Office of the Secretary of State of Texas

MAR 1 4 2007

Corporations Section

	Enti	Information —	
The name of the	entity is:		
uttross Group I	I, Inc.		
tate the name of th	ne entity as currently shown in the	records of the secretary of state	
he file number	issued to the filing entity by	the secretary of state is:	156126400
The registered a	gent and registered office of	e entity as currently sho	own on the records of the
ecretary of stat	e are: Albert J. Heinrich, A	ttorney	
08 West 18th.,	Austin, TX 78701		
	Change to Region	man Agent/Registere	il (Olitice
		modified to change the	registered agent and/or office of
the filing entity	as follows:		
	- 2000	i i cd	
	(Complete either A or B, but not b	stered Agent Change both, Also complete C if the ad	ldress has changed.)
A. The nev	v registered agent is an organ	Particular in the control of the con	
			200 200 200 200 200 200 200 200 200 200
OR			
	w registered agent is an incl-	lad resident of the state	whose name is:
	140		
First Name	Ma	Last Name	Suffix
	Regi	stered Office Change	
C. The bus	siness address of the register.	d agent and the registered	d office address is changed to:
			· · · · · · · · · · · · · · · · · · ·
Stre. Address (No I	Rd. Bldg.3 Suite #100	Austin	TX 74754 State Zip Code
	RECEIVED	et sted in this instrument	is the same as the registered
Form 401	MAR 14 2007	3	
	WALL TIE FOOL		

Secretary of State

Statement of Approval

The change specified in this statement has been authorized by the entity in the manner required by the BOC or in the manner required by the law governing the filing entity, as applicable.

Effectiveness of Filing (sateranic Approximation)
A. This document becomes effective when the document is filed by the secretary of state. B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: March 14th, 2007
C. This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90 th day after the date of signing is:
The following event or fact will cause the document to take effect in the manner described below:
E W AND IN THE SECOND PROJECT OF THE
and the second of the secution of the second
The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.
Date: March 14th, 2007

Signature and title of authorized person (see instructions)

Form 503 (Revised 01/06)

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



Assumed Name Certificate

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas

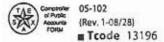
FEB 15 2008

Corporations Section

	Assumed Name
The assumed name under which the bu	usiness or professional service is, or is to be, conducted or
rendered is: BAM	
	Entity Information
The name of the entity filing the assum	ned name is:
Buttross Group II, Inc.	n in the records of the secretary of state or on its certificate of formation, if
not file 1 with the secretary of state.	is the resident and secretary of some of the certaining of
The faing entity is a; (Select the appropriate	entity type below.)
For-profit Corporation	Professional Corporation
☐ Non-ofit Corporation	Professional Limited Liability Company
Compensative Association	☐ Professional Association
1.in etal Liability Company	Limited Partnership
O0 r	
Specify type of entity if there is a	
	iting entity by the secretary of state is: 01561264
The state, country, or other jurisdiction	
- 100g(Har. 1770) 전 11.10 (11.10 Har) 12.10 (11.10 Har) 12.10 (11.10 Har) 12.10 (11.10 Har) 12.10 (11.10 Har)	entity in the jurisdiction of formation is:
790 Cameron Road, Bullo	Sing 3, Suite 100, Austin, Texas 78754
	of office and agent in Texas. The address of its
Alb at J. Heinrich, Jr.	
Alb et J. Heinrich, Jr. 7901 Cameron Road, Buils	Suite 100, Austin, Texas 78754
790 Cameron Road, Build The miles of the principal office of the principal off	discretify (if not the same as the registered office) is:
Albert J. Heinrich, Jr. 7961 Cameron Road, Build The miles of the principal office of the principal o	discretify (if not the same as the registered office) is:
7901 Cameron Road, Build The mile as of the principal office of the principal	discretify (if not the same as the registered office) is: 3. Suite 100, Austin, Texas, 78754 and a registered office and agent in Texas. Its office address in

in Texas IS:	
The entity is not incorporated, organize the principal place of business in this state i	ed or associated under the laws of Texas. The address of
The office address of the entity is:	
Per	riod of Duration
the secretary of state, or	name will be used is 10 years from the date of filing with
with the secretary of state (not to exceed 10 or The assumed name will be used until	(not to exceed 10 years).
County or Countie	s in which Assumed Name Used
A!' counties with the exception of the f Only the following counties:	ollowing counties:
	Execution
mater ly false or fraudulent instrument, a.	the penalties imposed by law for the submission of a undersigned is acting in the capacity of an attorney in the entity has duly authorized the undersigned in
Date: February 14, 2008	Could be Butteress Bussident
	Figurature and title of authorized person(s) (see instructions)

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT



(To be filed by Corporations and Limited Liability Companies (LLCS))
This report MUST be filed to satisfy franchise tax requirements

1 7 4 2 9	3 9 0 1	8 4 2 0 0	8 tor	You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.			
Taxpayer name BUTTROSS GROUP II INC Mailing address PO BOX 5396						State file number or	1
City AUSTIN		State TX	ZIP Code 78763	Plus 4 5396	015612640	file number	83
Blacken circle if ther Entity's principal office	e are currently no ch	nanges or additions to the inform	ation displayed in Section	on A of this report.	. Then complete Sect	lons B and C.	(
Principal place of business					i IMMA		
Please sign below!	Report is complete report. There is no	I member information is reported I. The information is updated an requirement or procedure for sur r members change throughout ti	nually as part of the fran	ichlse tax	17	742939018408	li
SECTION A Name, title	and mailing addres	s of each officer, director or me Title	mber.	1 Director			
DAVID A BUTTROSS		PRESIDENT		.O YES	Term expiration		
Mailing address PO BOX 5396 Name	×	City AUSTIN Title		Director	State TX	ZIP code 78763 m d d y	, y
DAVID A BUTTROSS SR		TREASURER		O YES	Term expiration		
Mailing address PO 80X 5186 Name		City AUSTIN Title		l Director	State TX	ZIP code 78763	
DAVID A BUTTROSS JR		DIRECTOR		YES	Term expiration		1
Mailing address PO BOX 5396 Name		City AUSTIN Title		l Director	State TX	ZIP code 78763	
DAVID A BUTTROSS JR		SECRETARY		O YES	Term expiration		1
Mailing address PO BOX 5396		City AUSTIN		1,	State TX	ZIP code 78763	3.
		for each corporation or U.C. if	any, in which this repo	rting entity owns	an interest of	•	
Name of owned (subsidiar	(10%) or more. y) corporation or lim	ited liability company	State of formation	Texas SC	OS file number, if any	Percentage of Owners	ship
Name of owned (subsidiar	y) corporation or lim	ited liability company	State of formation	Texas SC	OS file number, if any	Percentage of Owners	hip
		for each corporation or LLC, if	any, that owns an inte	rest of ten percer	nt (10%) or more in t	his reporting	63
Name of owned (parent) c	nited liability comporporation or limited		State of formation	Texas 50	OS file number, If any	Percentage of Owners	ship
Registered agent and regis Agent: ALBERT J HEINR		y on file. (See instructions if you n	eed to make changes)		en circle if you need fo gistered agent or reg	orms to change istered office informatio	on.
Office: 7901 CAMERON	RD., BLDG. 3, STE	100 -	AUSTIN	*	State	ZIP Code 78754	Ü
		of the Tax Code for each correction will be available for public Inspect 20.		y that files a Texas Fr	anchise Tax Report, Use	additional sheets	
		ny attachments is true and covert to officer, director or member and who					
rign)	_		RESIDENT	Date	[Area c	ode and phone number	
GD-ennight was	Spanish S	= tores's	naturalities that	at my			le li
					VE/DE	O PIR IND	0

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT



05-102 (Rev. 1-08/28) **Tcode** 13196

(To be filed by Corporations and Limited Liability Companies (LLCS))
This report MUST be filed to satisfy franchise tax requirements

Taxpayer name BUTTROSS GROUP II INC Malling address PO BOX 5396 City AUSTIN State TX ZIP Code Plus 4 5396 Blacken circle if there are currently no changes or additions to the information displayed in Section A of this report. The	Secretary of State file number or Comptroller file number 0156126400 en complete Sections B and C.
Blacken circle if there are currently no changes or additions to the information displayed in Section A of this report. The Entity's principal office Principal place of business Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as	0156126400
Blacken circle if there are currently no changes or additions to the information displayed in Section A of this report. The Entity's principal office Principal place of business Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as	400 (CANADA CONTRACTOR AND A CONTRACTOR
Principal place of business Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as	
Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as	
Please 119# 88006 Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as	
	1742939018408
SECTION A Name, title and mailing address of each officer, director or member.	
Name Title Director	mmddyy Term
	expiration
	tate ZIP code 78 78763
Name Title Director	m m d d y y Term
	expiration
Name Title Director	m m d d y y
O YES	Term
The state of the s	itate ZIP code
Name Tatle Director	mmddyy
1 1 115	Term expiration
Minling address City S	itate ZIP code
SECTION B Enter the information required for each corporation or U.C. if any, in which this reporting entity owns an	interest of
ten percent (10 %) or more. Name of owned (subsidiary) corporation or limited liability company (5 rate of formation (Texas SOS file))	lle number, if any {Percentage of Ownership
	ile number, If any Percentage of Ownership
SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (1)	0%) or more in this reporting
entity of limited liability company. Name of owned (parent) corporation or limited liability company State of formation Texas SOS file	ile number, if any Percentage of Ownership
	ircle If you need forms to change ered agent or registered office information.
Office: 7903 CA141 WED., RLDG. 3. STE 100 City AUSTIN	State ZIP Code
The Embryold University Tipe Section 171.203 of the Tax Code for each corporation on limited liability company that files a Texas Franch file and 1.5. Beautify of the Cesse and Delinite meating will be available for puts a major claim.	N. 14 (1988 - 1987) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
I do I see that the Information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date to	
If you have a second to the se	IArea code and phone number
re) - MESIDENT -	(512) 320 - 0888
tues to and the difference	
	VE/DE O PIR IND

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

Comprotor of Public Accordence of Comprotor

05-102 (Rev. 1-08/28) ■ ¥code 13196

(To be filed by Corporations and Limited Liability Companies (LLCS))
This report MUST be filed to satisfy franchise tax requirements

■ Taxpayer number	■ Report year	You	have certain right:	s under Chapter 552	and 559, Government Code,
1 7 4 2 9 3 9 0 1 8 4	2 0 0 9				e have on file about you. 381, toll free nationwide.
Taxpayer name BUTTROSS GROUP II, INC. Mailing address PO BOX 5396					State file number or
City AUSTIN	State TX	ZIP Code 78763	Plus 4 5396	Comptroller 015612640	
Blacken circle if there are currently no changes or as	ditions to the informa	tion displayed in Section	n A of this report. T	Then complete Secti	ions B and C.
Entity's principal office		18 B.	10	1	
Principal place of business					
Please sign below! Officer, director and member in Report is completed. The information officers, directors, or members	mation is updated and it or procedure for some	mily as part of the franc dementing the informat	hise tax	17	742939018409
SECTION A Name, title and mailing address of each of	fficer, director or mer	nber.			
Name	Title		Director	, m	m d d y y
DAVID A BUTTROSS Mailing address	PRESIDENT		O YES	Term expiration	
PO BOX 5396	AUSTIN		S 357 W	TX	78763
Name	Title		Director	Term I I	m d d y y
DAVID A BUTTROSS SR	TREASURER		O YES	expiration	
Mailing address PC - UX 51-16	City AU I-THY		12	State TX	ZIP code 78763
Not e	Title		Director	m	m d d y y
DAVID A BUTTROSS JR	DIRECTOR		● YES	Term expiration	
Molling address PO BOX 5396	City AMETIN			State TX	ZIP code 78763
Name	Tr		Director	m	m d d y y
DAVID A BUTTROSS JR	SECRETARY		O YES	Term expiration	
Mailing address PO BOX 5-96	City A 3 1 1 m			State TX	ZIP code 78763
SECTION B Enter the information required for each of	orporation in IC, if a	ny. in which this repor	ting entity owns a	an interest of	O€10000400
ten percent (AP) for more. "Are e of owned (subsidiary) corporation or limited liability	ycompany	State of formation	Texas SOS	file number, if any	Percentage of Ownership
Name of owned (subsidiary) corporation or limited liability	y company	State of formation	Texas SOS	file number, if any	Percentage of Ownership
SECTION C Enter the information required for each of	orporation of the Cafe	my, that owns an intere	est of ten percent	(10%) or more in t	his reporting
entity or limited liability company. Name of owned (parent) corporation or limited liability co	mpany	State of formation	Texas SOS	S file number, if any	Percentage of Ownership
Renistered agent and registered office currently on file. (S Agents ALBERT J HEINRICH	iee instructions if you ne	ed to make changes)		circle if you need for	orms to change Istered office information.
Office: 7001 CAMERO I ID., PLDG. 3, STE 100		City		State	ZIP Code 78754
The last formation region of the Tax C		or herited liability company	that files a Texas Fran	The Prince Address Prince	
The second secon	programme and the man	lest of my knowledge ar	and builted as of the de-	to holour and that a ce	second this support has been
If the interest the information in the discurrent and any attachment to each person named in this report who is an officer, directly					
sim,			Date 10/30/2009		ode and phone number
he az	_		A section of the sect	(512	2) 320 - 0888
	1900145-001-0	Tales a Military	· Inc		
				VE/DE	O PIR IND O
		13040	43		

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT 05-102 (To be filed by Community and Limited Liability Companies (LLCS)) (Rev. 1-08/28) This report MUST and file of to satisfy franchise tax requirements ■ Tcode 13196 Taxpayer number Report v= e You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide. Taxpayer name BUTTROSS GROUP II, INC. Mailing address PO BOX 5396 Secretary of State file number or Comptroller file number City ZIP Code TX 5396 78763 0156126400 Blacken circle if there are currently no changes or additions to the information displayed in Section A of this report. Then complete Sections 8 and C. O Entity's principal office Principal place of business Officer, director and member information is remained as of the date a Public Information Please sign below! Report is completed. The information is update annually as part of the franchise tax report. There is no requirement or procedure to supplementing the information as 2939018409 officers, directors, or members change throughout the year, SECTION A Name, title and mailing address of each officer, director or member. Name Title Director Term **DAVID A BUTTROSS JR** PRECIDENT YES expiration Mailing address ZIP code State PO BOX AUSTIN 78763 Title-Name Director d Term YES expiration Mailing address City State code Title Name Director. d Term YES expiration Mailing address City State Director Name d Term YES expiration IZIP code City Mailing address State SECTION B Enter the information required for each corporation of HC if any, in which this reporting entity owns an interest of ten percent (10 For more, Name of owned (subsidiary) corporation or limited liability company State of formation Texas SOS file number, if any Percentage of Ownership Name of owned (subsidiary) corporation or limited liability company Texas SOS file number, if any State of formation Percentage of Ownership SECTION C Enter the information required for each corporation of U.C. Harv, that owns an interest of ten percent (10%) or more in this reporting entity or limited hability company. Name of owned (parent) corporation or limited liability company tate of formation

Name of owned (parent) corporation or limited liability company

| Registered agent and registered office currently on file. (See instructions of the need to make changes)
| Agent: Albert J Heinflich |
| Office: 7001 CAMERON 50, 91.DG, 3, STE 100 |
| City AUSTIN |
| Cit

The above information is recovered. In occurs 173,203 of the Tax Code for each commuted or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A. B. and C. If necessary in commutation will be available for positions, or both.

I declare that the information in this document and any attachments is true and currect to the hest of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or mention and who is a currently employed by this, or a related, corporation or limited liability company.

Sign | Date | Area code and phone number | 10/30/2009 | (512) 320 - 0888

