Form #2204 Rev 9/2017

Submit to: SECRETARY OF STATE **Government Filings Section** P O Box 12887 Austin, TX 78711-2887 512-463-6334 FAX 512-463-5569

Filing Fee: None

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OATH OF OFFICE

rning rec. None	
IN THE NAME AND BY THE AUTHORITY I, Land Lynning and JC. execute the duties of the office of Williams the State of Texas, and will to the best of my about the United States and of this State, so help me	, do solemnly swear (or affirm), that I will faithfully of ility preserve, protect, and defend the Constitution and laws
	JAMES STATE OF THE
	Signature of Officer
Certification of Person Authorized to Administer Oath	
State of TEXAS	
County of WILLIAMS TIN	
	2014 DOTTO
Sworn to and subscribed before me on this	30TH day of UCTOBER, 2024.
	z .
(Affix Notary Seal.	
My Notary ID # 128605277 Expires November 11, 2027	Marine Seal
	Signature of Notary Public or
	Signature of Other Person Authorized to Administer An
(	Dath
	TDEFENTE UEAC
F	Printed or Typed Name