



Control Number: 50042



Item Number: 27

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INTEGRITY
EXCELLENCE
TRUST

September 1, 2020

Public Utility Commission
Attention: Filing Clerk
1701 N. Congress Avenue
P.O. Box 13326
Austin, TX 78711

Re: Tri Try WSC CCN Application – **Response to Certificate of Consent**
Docket # - 50042

To Whom it May Concern:

The Public Utility Commission Staff sent documents on August 28, 2020, which included the certificate of convenience and necessity, a final map of the requested service area, and a consent form, with a request to return the consent form by September 4, 2020. We are returning the consent form with the **do not concur** line checked. This is since the name is shown as Tri Try Water Corp and not the corrected name which is Tri Try Water Supply Corporation. This is incorrect on the consent form, CCN, and map.

Secondly, staff requested a copy of the documents filed with the secretary of state regarding the name change above. The signed consent form, CCN, and Map with Mark up as well as the secretary of state documentation is included in the attachments.

1. Attachment #1 – signed consent form
2. Attachment #2 – CCN Markup
3. Attachment #3 – Map Markup
4. Attachment #4 – Secretary of State Documents

Please let me know if we can provide any additional information.

JACOB | MARTIN

Allen Phillips, P.E.

Cc: Mr. Gary Myers, President, Tri Try WSC

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3465 Curry Lane
Abilene, TX 79606
325.695.1070

1508 Santa Fe, Suite 203
Weatherford, TX 76086
817.594.9880

4920 S Loop 289
Lubbock, TX 79414
806.368.6375



TBPE Firm #: 2448
TBAE Firm #: BR 2261
TBPLS Firm #: 10194493

CONSENT FORM

Docket No. 50042, Application of Tri Try Water Supply Corporation to Obtain a Water Certificate of Convenience and Necessity in Stonewall County

☐ I concur with the map and certificate transmitted by e-mail on August 28, 2020.

☒ I do not concur with the map and certificate transmitted by e-mail on August 28, 2020.

I understand that I have until September 4, 2020 to provide my response.

Tri Try Water Supply Corporation

I am authorized by ~~Tri Try Water Corp~~ to sign this form.

Signature: _____

Printed Name: Gary Myers

Relationship to Applicant: President

Date signed: 09/01/2020

In accordance with the Order Suspending Rules, issued in Project No. 50664

Please upload the signed consent form to the PUC interchange filer at:

<https://interchange.puc.texas.gov/filer>

and email a copy of the filing (in pdf form) alongside the tracking number confirmation sheet to

centralrecords@puc.texas.gov

on the same day the upload is done.

or for Shipping/Overnight Delivery upload the document to the PUC interchange filer at:

<https://interchange.puc.texas.gov/filer>

and mail filing package alongside the tracking number confirmation sheet to:

Public Utility Commission of Texas

Central Records

1701 N. Congress, Suite 8-100

Austin, Texas 78701



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Public Utility Commission of Texas

By These Presents Be It Known To All That

~~Tri Try Water Corp~~
Tri Try Water Supply Corporation

having obtained certification to provide water utility service for the convenience and necessity of the public, and it having been determined by this Commission that the public convenience and necessity would in fact be advanced by the provision of such service, Tri Try Water Corp is entitled to this

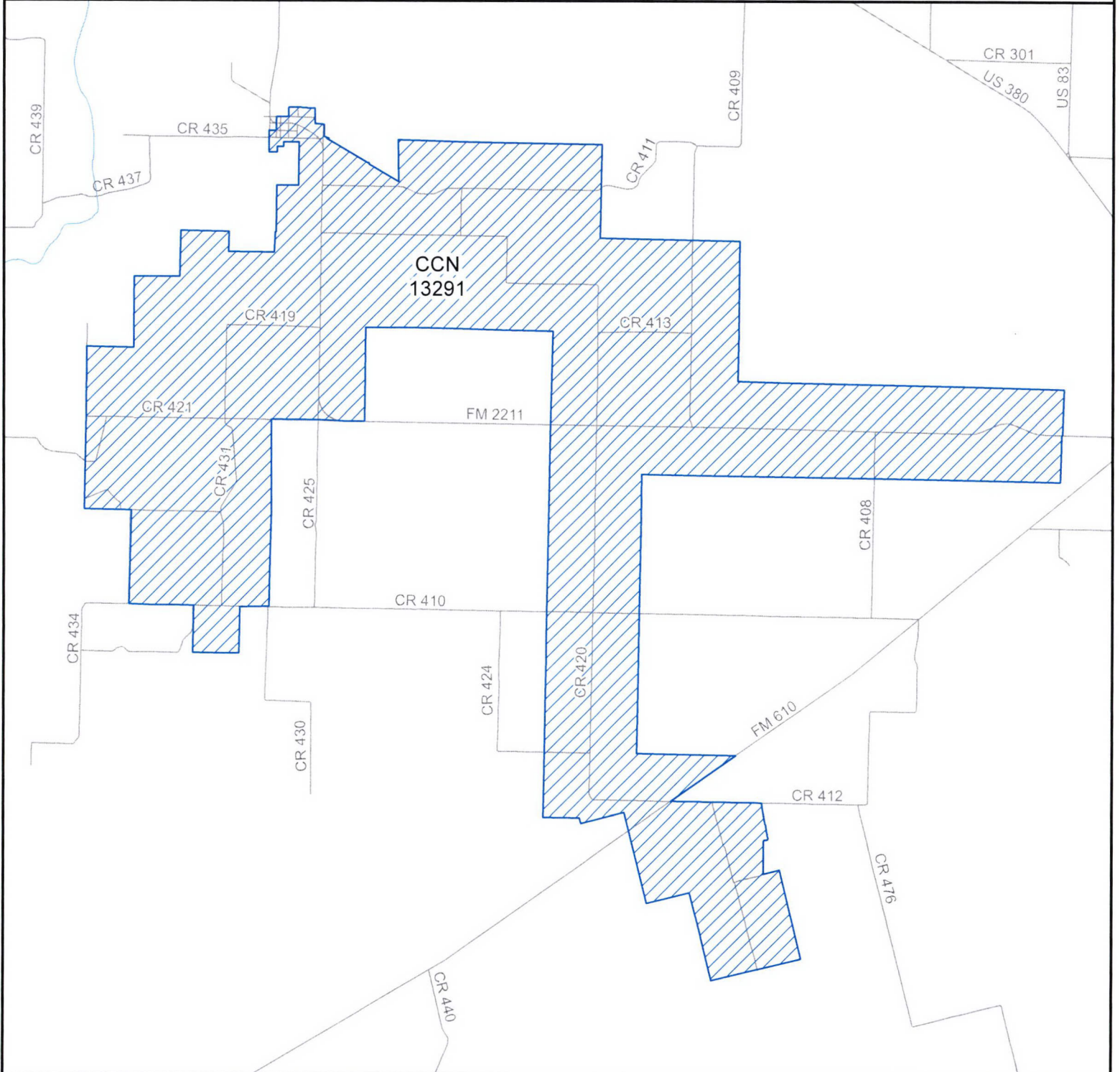
Certificate of Convenience and Necessity No. 13291

to provide continuous and adequate water utility service to that service area or those service areas in Stonewall County as by final Order or Orders duly entered by this Commission, which Order or Orders resulting from Docket No. 50042 are on file at the Commission offices in Austin, Texas; and are matters of official record available for public inspection; and be it known further that these presents do evidence the authority and the duty of the ~~Tri Try Water Corp~~ to provide such utility service in accordance with the laws of this State and Rules of this Commission, subject only to any power and responsibility of this Commission to revoke or amend this Certificate in whole or in part upon a subsequent showing that the public convenience and necessity would be better served thereby.

Tri Try Water Supply Corporation

Issued at Austin, Texas, this _____ day of _____ 20__.

~~Tri Try Water Corp.~~ **Tri Try Water Supply Corporation**
Water CCN No. 13291
PUC Docket No. 50042
Obtained New CCN in Stonewall County



Water CCN



13291 - ~~Tri Try Water Corp.~~

Tri Try Water Supply Corporation

0 0.75 1.5
Miles



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

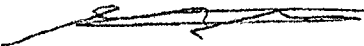
Re: Statement of Approval – Amending the Corporate Name and filing of Certificate of Amendment

On August 20, 2020, a special meeting of the Tri Try Water Corp. met, having been given appropriate notice per the bylaws of the organization, for the express purpose of changing their name to Tri Try Water Supply Corporation and the filing of a Certificate of Amendment reflecting such.

A member of the quorum present made a motion to change the corporation's name and file the appropriate Certificate of Amendment. The motion was seconded, and the members present unanimously approved the name change to Tri Try Water Supply Corporation.

Any questions regarding the above amendment can be addressed to Gary Myers (gmyers6@yahoo.com) at P.O. Box 255, Aspermont, Texas 79502

Respectfully,

A handwritten signature in black ink, appearing to read "Gary Myers", with a horizontal line drawn through it.

Gary Myers, Director

Form 424

(Revised 05/11)

Submit 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



This space reserved for office use.

Certificate of Amendment**Entity Information**

The name of the filing entity is:

Tri Try Water Corp.

State the name of the entity as currently shown in the records of the secretary of state. If the amendment changes the name of the entity, state the old name and not the new name.

The filing entity is a: (Select the appropriate entity type below.)

- | | |
|---|---|
| <input type="checkbox"/> For-profit Corporation | <input type="checkbox"/> Professional Corporation |
| <input checked="" type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Professional Limited Liability Company |
| <input type="checkbox"/> Cooperative Association | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Partnership |

The file number issued to the filing entity by the secretary of state is: 0155906001The date of formation of the entity is: 11/23/1999**Amendments****1. Amended Name**

(If the purpose of the certificate of amendment is to change the name of the entity, use the following statement)

The amendment changes the certificate of formation to change the article or provision that names the filing entity. The article or provision is amended to read as follows:

The name of the filing entity is: (state the new name of the entity below)

Tri Try Water Supply Corporation

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

Registered Agent
(Complete either A or B, but not both. Also complete C.)

☐ A. The registered agent is an organization (cannot be entity named above) by the name of:

OR

☐ B. The registered agent is an individual resident of the state whose name is:

<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>
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The person executing this instrument affirms that the person designated as the new registered agent has consented to serve as registered agent.

C. The business address of the registered agent and the registered office address is:

	TX			
<i>Street Address (No P.O. Box)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>	

3. Other Added, Altered, or Deleted Provisions

Other changes or additions to the certificate of formation may be made in the space provided below. If the space provided is insufficient, incorporate the additional text by providing an attachment to this form. Please read the instructions to this form for further information on format.

Text Area (The attached addendum, if any, is incorporated herein by reference.)

☐ Add each of the following provisions to the certificate of formation. The identification or reference of the added provision and the full text are as follows:

..
..

☒ Alter each of the following provisions of the certificate of formation. The identification or reference of the altered provision and the full text of the provision as amended are as follows:

Article One

The name of the Corporation is Tri Try Water Supply Corporation

☐ Delete each of the provisions identified below from the certificate of formation.

Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

Effectiveness of Filing (Select either A, B, or C.)

- 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: _____
- C. ☐ This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

Date: 8/21/20

By: _____

Signature of authorized person

Gary Myers
Printed or typed name of authorized person (see instructions)