

RECEIVED

LOUISIANA PUBLIC SERVICE COMMISSION FEB 20 2026

PO Box 91154; Baton Rouge, LA 70821

(888) 342-5717 or (225) 342-4439

FISCAL LA Public Service Commission



APPLICATION FOR STOCK TRANSFER/CHANGE IN OWNERSHIP LESS THAN 50% FOR ALL CARRIERS OR TRANSFER DUE TO ESTATE PLANNING, INHERITANCE OR BUSINESS CONTINUITY FOR NON-WASTE OR SALTWATER CARRIERS

BUSINESS ENTITY- APPLICANT INFORMATION

SECTION 1

Name as listed on the Certificate or Permit: (Including any doing business as "dba" name) State Line Vacuum Services LLC
DBA:
Business Entity's Authorized Representative: Alan Tomlinson
Applicant currently holds Common Carrier Certificate or Contract Carrier Permit Number(s): A copy has been attached to this application as Exhibit "A"
Business Address: 7034 Hwy 79
City: Homer State: La. ZIP Code: 71040
Mailing Address: 7034 Hwy 79
City: Homer State: La. ZIP Code: 71040
Telephone # (Include Area Code) 318-624-0486
Fax # (Include Area Code)
Cell # (Include Area Code)
Email Address: statelinevacuum@gmail.com
Has your FEIN# changed? If so, please provide your new number: 20-5590758
CONFIRM COMPANY TAX REPORTING YEAR (Check ONLY one box)
[X] Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.
[] Company's Tax reporting year is on a FISCAL basis reporting from _____ to _____ each year.
COMPANY BUSINESS STRUCTURE
Check one box:
[] Louisiana Domestic Corporation Date of Incorporation _____
[X] Louisiana Domestic Limited Liability Company (LLC) Date of Formation 9-22-06
[] Louisiana Domestic Partnership Date of Formation _____
[] Louisiana Limited Liability Partnership Date of Formation _____
[] Foreign* Corporation in the State of _____ Date of Incorporation _____
[] Foreign* Limited Liability Company (LLC) in the State of _____ Date of Formation _____
[] Foreign* Partnership in the State of _____ Date of Formation _____
MUST attach copies of the company's Secretary of State Certificate of Good Standing & Amendments made to the Articles of Incorporation, Organization or Formation along with copies of all amendments and last annual reports if applicable from your state of origin or existence as "Exhibit B". *Foreign Entities must submit copies of the all amendments and last annual report filed with the Louisiana Secretary of State's Office along with a Certificate of Good Standing issued by the Louisiana Secretary of State's Office.

BUSINESS ENTITY- APPLICANT INFORMATION

SECTION 1 (Continued)

List the Names and Titles of all Officers and/or Members and percentage of ownership and/or number of shares (if applicable) **PRIOR** to the transfer as currently recognized with the Commission.

Name	Title (Corporations list President, Vice President, Secretary, Treasurer and LLC companies list Members)	Ownership Percentage of ownership and/or number of shares
<i>Carter Lewis</i>		<i>38.10%</i>
<i>Michael White</i>		<i>33%</i>
<i>Brookie White</i>		<i>18.8%</i>
<i>Ellen H. Lewis Estate</i>		<i>10.1%</i>

REPRESENTATION OF APPLICANT

SECTION 2

If Applicant is represented by legal counsel or if this application is being filed by legal counsel, please provide the following:

LEGAL COUNSEL'S NAME:

FIRM NAME:

Mailing Address:

City:

State:

ZIP Code:

Telephone # (Include Area Code)

Fax # (Include Area Code)

Cell # (Include Area Code)

Email Address:

DETAILS OF STOCK TRANSFER OR CHANGE IN OWNERSHIP

SECTION 3

Please attach a copy of the transfer or change in ownership agreement, a certified copy of the corporate resolution authorizing the stock transfer, and the appropriate stock certificate numbers (if applicable), to this application as **Exhibit "C"** and provide the details of the stock transfer or change in ownership below:
(If additional space is needed, attach a separate sheet listing details to Exhibit C)

DETAILS OF STOCK TRANSFER OR CHANGE IN OWNERSHIP

SECTION 3 (Continued)

If the stock transfer is approved, list the Names and Titles of all Officers and/or Members and percentage of ownership and/or number of shares (if applicable) **AFTER** the proposed transfer is complete.

Name	Title (Corporations list President, Vice President, Secretary, Treasurer and LLC companies list Members)	Ownership Percentage of ownership and/or number of shares
Carter Lewis		50%
Michael White		33%
Brookie White		17%

BANKRUPTCY, LEVY AND RECEIVERSHIP INFORMATION

SECTION 4

(If additional space is needed, attach a separate sheet for each responses as needed)

1. Is the certificate holder current with inspection and supervision fee reports and payments with the Louisiana Department of Revenue? NO YES

Copies of the Certificate or Permit Holder's last 4 quarters of Quarterly Inspection & Supervision Reports filed with the LDR along with proof of payments MUST be attached to this application as Exhibit "D".

2. Is the common carrier certificate or contract carrier permit pledged or otherwise encumbered? NO YES*

*If you answered yes to number 2, give the names and addresses of those whose favor the authority is encumbered:

3. Does the Louisiana Department of Revenue and taxation hold a levy against this the common carrier certificate or contract carrier permit? NO YES*

*If you answered yes to number 3, attach a copy of the Notice of Levy to this application as an **Exhibit**

4. Are there any other levies against the common carrier certificate or contract carrier permit? NO YES*

*If you answered yes to number 4, attach copies of the levies to this application as an **Exhibit** and list the names and addresses of parties holding the levies; the nature of the levies and amount(s) claimed under each levy below.

5. Is the applicant involved in any bankruptcy proceeding? NO YES*

*If you answered yes to number 5, attach a copy of the Notice of Bankruptcy to this application as an **Exhibit** and list the name(s) of counsel for the party(s) with an interest in the common carrier certificate or contract carrier permit below:

/

VERIFICATION
SECTION 5

STATE OF Louisiana PARISH/COUNTY OF Claiborne

BEFORE ME, the undersigned authority, Brookie White (Applicant as Authorized Representative) who represents State Line Vacuum Services LLC (Business Entity) personally came and appeared, who, after being duly sworn, did depose and say that he/she is the APPLICANT in the above application; that he/she desires to TRANSFER stock or ownership in its Common Carrier Certificate or Contract Carrier Permit, he/she represents that the foregoing responses are good, true, and accurate. Applicant acknowledges that should any response be shown to have been either a negligent or intentional misrepresentation of the facts, action taken by the Louisiana Public Service Commission in reliance of the responses contained herein may be declared void ab initio and revocable upon complaint by any interested party or by ex parte motion of the Louisiana Public Service Commission. Applicant further understands that the information contained in this application may be shared with the Louisiana Department of Revenue for purposes of Inspection and Supervision Fees.

Applicant's signature reflects an understanding of the consequences attributable to misstatements or misrepresentations of fact.

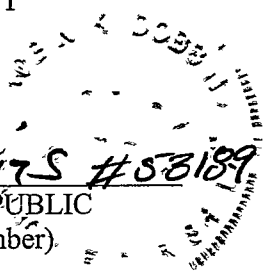
SWORN TO AND SUBSCRIBED before me this 9 day of February, 2026

Brookie White
PRINTED NAME OF APPLICANT

[Signature]
SIGNATURE OF APPLICANT

Robin K Dobbins
PRINTED NAME OF NOTARY PUBLIC

Robin K Dobbins #53189
SIGNATURE OF NOTARY PUBLIC
(including Notary Number)



LPSC OFFICE USE ONLY

Accepted by Staff [Signature] Date 2-25-26

DOCKET # S-37854 PUBLISHED IN BULLETIN # 1370 ON 2-27-26
Date



R. Kyle Ardoin

SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

STATE LINE VACUUM SERVICES, L.L.C.

A limited liability company domiciled in HAYNESVILLE, LOUISIANA,

Filed charter and qualified to do business in this State on September 22, 2006,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 1, 2023

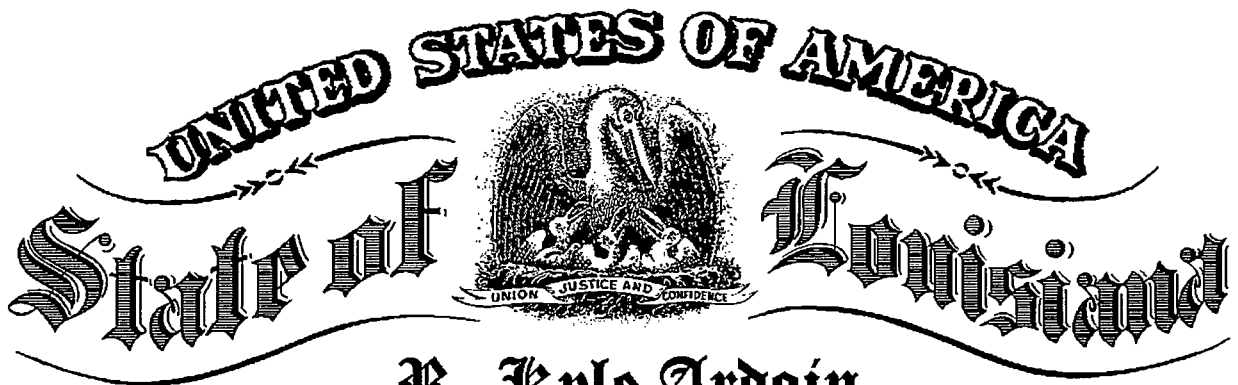
Secretary of State

Web 36276140K



Certificate ID: 11763606#52N83

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov



R. Kyle Ardoin

SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

STATE LINE VACUUM SERVICES, L.L.C.

A limited liability company domiciled in HAYNESVILLE, LOUISIANA,

Filed charter and qualified to do business in this State on September 22, 2006,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 1, 2023

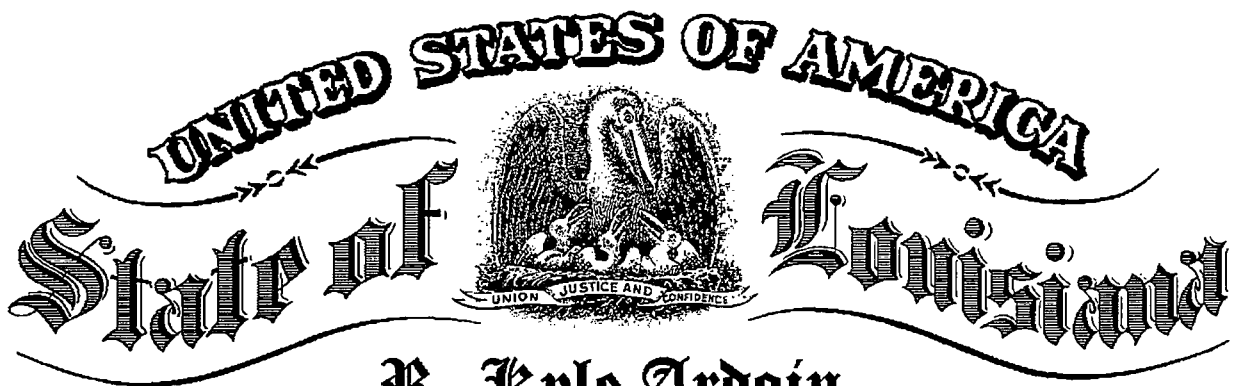
Secretary of State

Web 36276140K



Certificate ID: 11763606#52N83

To validate this certificate, visit the following web site, go to **Business Services, Search for Louisiana Business Filings, Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov



R. Kyle Ardoin
SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that
the attached document(s) of

STATE LINE VACUUM SERVICES, L.L.C.

are true and correct and are filed in the Louisiana Secretary of State's Office.

36276140K	ORIGF	9/22/2006	4 page(s)
41555000	CHOFF	6/17/2014	1 page(s)
45224392	22 AR	1/12/2023	1 page(s)

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 1, 2023

Secretary of State

WEB 36276140K



Certificate ID: 11763600#M7Q83

To validate this certificate, visit the following web site, go to **Business Services**, Search for **Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.

www.sos.la.gov

**ARTICLES OF ORGANIZATION
OF
STATE LINE VACUUM SERVICES, L.L.C.**

STATE OF LOUISIANA
PARISH OF CLAIBORNE

The undersigned, for the purposes of forming a limited liability company in accordance with the Louisiana Limited Liability Company Law, hereby adopts the following articles of organization:

1. NAME

The name of this limited liability company is: **STATE LINE VACUUM SERVICES, L.L.C.** (the "company").

2. PURPOSE

This company is formed to engage in any lawful activity for which limited liability companies may be formed under Louisiana law.

3. DURATION

The Company shall terminate on the earliest to occur of the following events, and only the following events:

- (1) The date 50 years from the execution of these articles of organization, unless extended by the unanimous vote of the members prior to such date;
- (2) The disposition of all of the property, immovable and movable, owned by the company, or
- (3) The written consent of the members holding a majority membership interest in the company, filed in the conveyance records of Claiborne Parish, Louisiana.

4. VOTING

Each member shall be entitled to vote on all matters concerning the company in accordance with the operating agreement.

5. MANAGEMENT

DANIEL W. NEWELL
Attorney at Law
Post Office Box 179
600 East Main Street
Homer, Louisiana 71040
Telephone (337) 927-2517

State Line Vacuum Services, L.L.C./667 /jr

5.1 **O. BRYANT LEWIS** shall be the manager of the company. The manager has full authority to act on behalf of the company. An original manager may not be removed or replaced except by the unanimous consent of the members. A successor manager may not be removed except by the vote by the members having a majority of the membership interests. A manager need not be a member. Without limiting the generality of the foregoing, the authority of the managers includes, but is not limited to the authority to:

5.1.1 The right to receive, deposit and make withdrawals from company accounts;

5.1.2 The right to borrow, contract a loan, acknowledge a debt, execute notes, mortgages or security agreements;

5.1.3 The right to buy, sell, lease or encumber any property, either movable or immovable,

5.1.4 The right to make a transaction or compromise or take any action in matters of litigation, including submitting or referring such matter to arbitration; and

5.1.5 The right to take any action on behalf of the company as a partner, stockholder or member of any other entity.

5.2 The consent of the manager and the majority of the membership interests is required to amend the articles of organization or operating agreement.

5.3 A manager insured by a life insurance policy owned by the company or over which the company exercises any incident of ownership shall have no right or power to exercise any incident of ownership with respect to such policy, including, but not limited to, the right to borrow from the insurance, to pledge the policy as collateral for any loan, to change or prevent any change in the beneficiary designation, to surrender the policy in whole or in part for its cash surrender value or to cancel or terminate the policy. Any exercise of any incident of ownership in any such policy shall be only by the other manager(s), if any, or, if none, by the majority membership interests of the other members other than the insured manager.

5.4 Any member may certify resolutions setting forth the authority of the managers, which resolution may be in a form similar to those customarily used by corporations. Third parties shall be entitled to rely on such certification without further inquiry.

6. **TRANSFER AND ASSIGNMENT OF MEMBER'S INTEREST**

The assignment or transfer of a member's interest is subject to restrictions and may give the company the option to redeem the membership interest as set forth in the operating agreement.

7. **INDEMNITY**

DANIEL W. NEWELL
Attorney at Law
Post Office Box 179
600 East Main Street
Harmon, Louisiana 71040
Telephone (318) 927-2517

State Life Vacuum Services, LLC-667

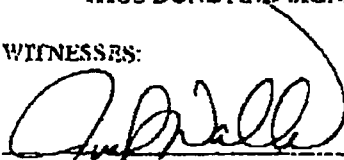
No member or manager shall ever be liable or responsible for the contract or faults of the Company, nor shall any mere informality have the effect of rendering the Company null or of subjecting or binding the members or managers to any liability. No member or manager shall be liable for the breach of any duty provided for in LSA-R.S. 12:1324. The Company shall fully indemnify the members and managers for judgments, settlements, penalties, fines, or expenses incurred because he, she, or it was a member or manager.

8. CERTIFICATE OF AUTHORITY

Persons dealing with the company may rely upon a certificate of any manager named in the initial report or any later writing recorded with the Secretary of State, State of Louisiana, to establish the membership of any member, the authenticity of any records of the company, or the authority of any person to act on behalf of the company, including but not limited to the authority to take the actions referred to in LSA-R.S. 12:1318(b)

THIS DONE AND SIGNED on this 22th day of September 2006.

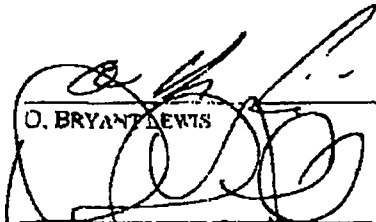
WITNESSES:



JUDY WALKER



SANDRA C. GRIGGS



DANIEL W. NEWELL (BAR# 19080)
ATTORNEY, STATE OF LOUISIANA

DANIEL W. NEWELL
Attorney at Law
Post Office Box 179
500 East Main Street
Houma, Louisiana 71040
Telephone: (337) 927-2517

State Line Val. Serv. cent. 11/25/06

4 3

LIMITED LIABILITY COMPANY INITIAL REPORT
(R.S. 12:1305(E))

1. The name of the limited liability company is **STATE LINE VACUUM SERVICES, L.L.C.**
2. The location and municipal address, not a post office box only, of this limited liability company's registered office is:

1920 Dawson Drive
Post Office Box 350
Haynesville, Louisiana 71038

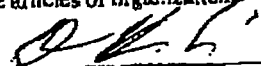
3. The full name and municipal address, not a post office box only, of this limited liability company's registered agent is:

O. Bryant Lewis
1920 Dawson Drive
Post Office Box 350
Haynesville, Louisiana 71038

4. The name(s) and municipal address(es), not a post office box only, of the first manager(s) is/are:

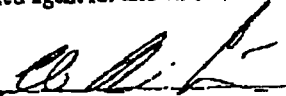
O. Bryant Lewis
1920 Dawson Drive
Post Office Box 350
Haynesville, Louisiana 71038

To be signed by each person who signed
the articles of organization:

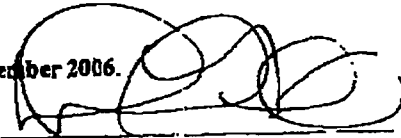

O. BRYANT LEWIS

AGENT'S AFFIDAVIT AND ACKNOWLEDGMENT OF ACCEPTANCE

I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above named limited liability company.


O. BRYANT LEWIS

Sworn to and subscribed before me this 20th day of September 2006.


DANIEL W. NEWELL (BAR# 19080)
ATTORNEY, STATE OF LOUISIANA

State Line Vacuum Services, LLC 09/21/06

DANIEL W. NEWELL
Attorney at Law
Post Office Box 174
500 East Main Street
Haynesville, Louisiana 71040
Telephone: (504) 927-2577

FROM : NEWELL AND NEWELL
FAX NO. : 318-927-3193
NEWELL & NEWELL
Sep 20 2006 11:54 AM
318-927-3193
Sep. 22 2006 09:40 AM P2

Sep 22 2006 9:34

Notice Of Change

Charter Number:

36276140K

Name:

STATE LINE VACUUM
SERVICES, L.L.C.

Mailing Address:

P.O. BOX 229
HAYNESVILLE, LA 71038

Registered Office Address in Louisiana:

10450 HWY. 79
HAYNESVILLE, LA 71038

Agents:

O. BRYANT LEWIS
10450 HWY. 79
HAYNESVILLE, LA 71038

Managers/Members:

O. BRYANT LEWIS (Manager)
1920 DAWSON DRIVE
HAYNESVILLE, LA 71038

CARTER LEWIS (Member)
10450 HWY 79
HAYNESVILLE, LA 71038

MICHAEL WHITE (Member)
10450 HWY 79
HAYNESVILLE, LA 71038

To be electronically signed by a member or manager. The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

Electronic Signature:

O BRYANT LEWIS
(6/17/2014)

R. Kyle Ardoin
Secretary of State



LIMITED LIABILITY COMPANY
ANNUAL REPORT
For Period Ending
9/22/2022



36276140K



2022

Mailing Address Only (INDICATE CHANGES TO THIS ADDRESS IN THIS BOX)

36276140 K
STATE LINE VACUUM SERVICES, L.L.C.

10656 HWY 79
HAYNESVILLE, LA 71038

1

(INDICATE CHANGES TO THIS ADDRESS IN THIS BOX)

Registered Office Address in Louisiana (Do not use P. O. Box)
10656 HWY. 79
HAYNESVILLE, LA 71038

Federal Tax ID Number

Our records indicate the following registered agents for the company. Indicate any changes or deletions below. All agents must have a Louisiana address. Do not use a P. O. Box. **A**
NEW REGISTERED AGENT REQUIRES A NOTARIZED SIGNATURE.

BROOKIE WHITE
10656 HWY 79 HAYNESVILLE, LA 71038

I hereby accept the appointment of registered agent(s).

Sworn to and subscribed before me on
NOTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #

New Registered Agent Signature

Notary Signature

Date

This report reflects a maximum of three members/managers for the company. Indicate any changes or deletions below. Include a listing of all names and addresses. Do not use a P. O. Box. If additional space is needed attach an addendum. *Officer titles, such as president or secretary are not acceptable.*

MICHAEL WHITE	Member
10656 HWY 79 HAYNESVILLE, LA 71038	
BROOKIE WHITE	Member
10656 HWY 79 HAYNESVILLE, LA 71038	
CARTER LEWIS	Member
10656 HWY 79 HAYNESVILLE, LA 71038	

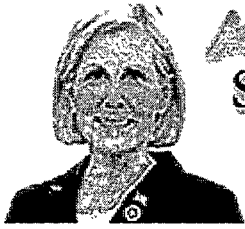
The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to the fine or imprisonment or both under R.S. 14:133.

SIGN →	To be signed by a manager, member, or agent Brookie White (SIGNED ELECTRONICALLY)	Agent	Title	Phone	Date 01/12/2023
	Signee's address	Email Address ON FILE			(For Office Use Only)

Enclose filing fee of \$30.00 Return by: 9/22/2022
Make remittance payable to Secretary of State To: Commercial Division
Do Not Send Cash P. O. Box 94125
Do Not Staple Baton Rouge, LA 70804-9125
web site: www.sos.louisiana.gov Phone (225) 925-4704

DO NOT STAPLE

3



SECRETARY OF STATE

LOUISIANA

(<https://www.sos.la.gov/Pages/default.aspx>)

[Buy Certificates and Certified Copies](#)

[Subscribe to Electronic Notification](#)

[Print Detailed Record](#)

Name	Type	City	Status
STATE LINE VACUUM SERVICES, L.L.C.	Limited Liability Company	HAYNESVILLE	Active

Previous Names

Business: STATE LINE VACUUM SERVICES, L.L.C.
Charter Number: 36276140K
Registration Date: 9/22/2006

Domicile Address

10656 HWY. 79
 HAYNESVILLE, LA 71038

Mailing Address

10656 HWY 79
 HAYNESVILLE, LA 71038

Status

Status: Active
Annual Report Status: In Good Standing
File Date: 9/22/2006
Last Report Filed: 8/25/2025
Type: Limited Liability Company

Registered Agent(s)

Agent: BROOKIE WHITE
Address 1: 10656 HWY 79
City, State, Zip: HAYNESVILLE, LA 71038
Appointment Date: 9/28/2021

Officer(s)

Additional Officers: No

Officer: MICHAEL WHITE
Title: Member
Address 1: 10656 HWY 79
City, State, Zip: HAYNESVILLE, LA 71038

Officer: BROOKIE WHITE

[Privacy - Terms](#)

Title: Member
Address 1: 10656 HWY 79
City, State, Zip: HAYNESVILLE, LA 71038

Officer: CARTER LEWIS
Title: Member
Address 1: 10656 HWY 79
City, State, Zip: HAYNESVILLE, LA 71038

Amendments on File (1)

Description	Date
Appointing, Change, or Resign of Officer	6/17/2014

[Back to Search Results](#)
[New Search](#)
[View Shopping Cart](#)

Docket No.: S-37864

LOUISIANA PUBLIC SERVICE COMMISSION

Exhibit _____

- Confidential sealed documents
- Oversized document
- Non-paper exhibit
- Photographs
- Other:

ISF
Returns

Please contact the Records Division of the Louisiana Public Service Commission at (225) 342-6017 for more information about this item.