

Attachment 1: Corporate Documents

State of North Dakota

SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING OF

HILAND PARTNERS HOLDINGS LLC

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that HILAND PARTNERS HOLDINGS LLC, a FOREIGN LIMITED LIABILITY COMPANY, authorized to transact business in the State of North Dakota on August 24, 2011, and according to the records of this office as of this date, has paid all fees due this office as required by North Dakota statutes governing a FOREIGN LIMITED LIABILITY COMPANY.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing to

HILAND PARTNERS HOLDINGS LLC

Issued: July 10, 2018

A handwritten signature in black ink, reading "Alvin A. Jaeger".

Alvin A. Jaeger
Secretary of State

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FOREIGN LIMITED PARTNERSHIP
REGISTRATION
SECRETARY OF STATE
SFN 7936W (7936 + 7974) (10-03)

DEC/21 2004
SEC. OF STATE

FOR OFFICE USE ONLY

ID Number	20,513,900 FLP
WO Number	177618
Filed	1-5-05
By:	NS

SEE REVERSE SIDE FOR FEES, FILING AND MAILING

- 1.A. The registration MUST be accompanied by ALL of the following
- Filing fee of \$100
 - Current certificate verifying identity, existence, and status of a foreign limited partnership certified by the government officer of the state or country under the laws of which it is organized
 - Signed Consent of Registered Agent and fee of \$10
- B. The following MAY be required:
- Signed consent to use of name and fee of \$10
 - Fictitious Name Certificate and fee of \$25
 - Fees and registrations to register general partners (SEE INSTRUCTION 14)

TYPE OR PRINT LEGIBLY

Provisions regarding foreign limited partnerships are found in North Dakota Century Code, Section 45-10 1-52.

2. Name of the limited partnership EXACTLY as it appears on certificate from state of origin: Hiland Partners, LP		3 Federal ID # [REDACTED]	
4 If applicable, provide the fictitious name and complete the Partnership Fictitious Name Certificate form if the selected fictitious name is not already registered in North Dakota. Only provide the fictitious name in this line if: a) The limited partnership name is not in the form as required of limited partnerships in North Dakota b) The Secretary of State has notified the limited partnership that its name is the same as or deceptively similar to a name already registered, and the limited partnership is unable to obtain consent to use of name from the previous filer or a certified copy of a final decree of a court of competent jurisdiction establishing prior right of this limited partnership to use of the name in North Dakota. c) The limited partnership does not wish to use or protect its name in North Dakota and chooses to use a name other than its limited partnership name Hiland Energy, LP			
5. State of Origin: Delaware	6. EXACT date of formation (month, day AND year) 10-18-04	7 Telephone #. (508) 242-6040	8 Toll-free telephone #
9. Nature of business or activities the limited partnership intends to conduct in North Dakota: gathering, compressing and dehydrating gas products and water injection services			
10. Name of required registered agent in North Dakota; (SEE INSTRUCTION 10) CT Corporation System		11. Social Security/Federal ID # of registered agent.	
12 Complete address of registered agent in North Dakota which may not only be a post office box: (Street/RR, PO Box if applicable, City, State, Zip+4) 314 East Thayer Avenue, Bismarck, North Dakota 58501-4018			
13 Complete address of the principal office which may not only be a post office box (Street/RR, PO Box if applicable, City, State, Zip+4) 205 West Maple, Suite 1100, Enid, Oklahoma 73701			
14. The general partners, their Social Security/Federal ID #, and the addresses of their principal places of business (If needed, attach a sheet to add names of additional general partners)			
NAME		SOCIAL SECURITY/FEDERAL ID #	
Hiland Partners GP, LLC		71-0972722	
20513800		205 West Maple, Suite 1100, Enid, OK 73701	
15 The complete address of the office at which a list of the names and addresses of the limited partners is kept, their capital contributions, and an undertaking by the foreign limited partnership to keep the list until the Foreign Limited Partnership Registration is withdrawn or canceled: (Street/RR, PO Box if applicable, City, State, Zip+4) 205 West Maple, Suite 1100, Enid, Oklahoma 73701			
16 The Secretary of State is appointed the agent of the foreign limited partnership for service of process if the agent's authority is revoked or if the agent cannot be found or served with the exercise of reasonable diligence "I, a general partner, have read the foregoing registration, know the contents thereof, and believe the statements made thereon to be true"			
Signature Randy Moeder		Date December 15, 2004	
Signature Stephanie Allison		Date:	
17. Name of person to contact about this report. Stephanie Allison		E-Mail Address [REDACTED]	
		Daytime telephone # and extension, if any [REDACTED]	

**REGISTERED AGENT
CONSENT TO SERVE**
SECRETARY OF STATE
SFN 7974 (10-03)

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SEC. OF STATE


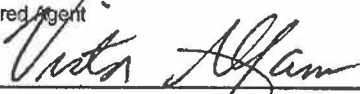
FOR OFFICE USE ONLY

ID#:	20,513,900		
WO#:	177618		
Filed:	1-5-05	By:	NS

SEE REVERSE SIDE FOR FILING AND MAILING INSTRUCTIONS

1. FILING FEE: \$10.00

TYPE OR PRINT LEGIBLY

2. Name of the organization for which the registered agent is to serve (corporation, limited liability company, limited liability partnership, limited partnership, limited liability limited partnership or real estate investment trust): Hiland Partners, LP	
3. Name of the registered agent: CT Corporation System	
4. Registered agent is (Check one) <input type="checkbox"/> An individual North Dakota resident <input checked="" type="checkbox"/> A corporation <input type="checkbox"/> A limited liability company <input type="checkbox"/> A limited liability partnership	5. Federal ID # or social security # of registered agent: 
6. According to state law, the newly appointed registered agent must sign a statement of consent to serve in that capacity (see instruction number 6 for authorized signers). "The undersigned, as the newly appointed registered agent for the organization named in number 2, consents to act as the registered agent for this organization until a change or resignation is submitted to the Secretary of State according to the provisions of North Dakota state law." Signature of Registered Agent:  Date: 12/20/04	

VICTOR ALEANO
ASSISTANT SECRETARY



CT
a Wolters Kluwer business

CT
111 Eighth Avenue
New York, NY 10011

212 894 8940 tel
212 590 9180 fax
www.ctlegalsolutions.com

November 16, 2010

Clara M. Jenkins
Director, Business Systems & Programs
Office of the Secretary of State
600 East Boulevard Avenue, Dept. 108
Bismarck, North Dakota 58505-0500

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NOV 17 2010

SEC. OF STATE

Re: Change of Address for C T Corporation System (A Commercial Registered Agent)

Dear Ms. Jenkins:

Please change the address of **C T Corporation System**, a commercial registered agent, to the following:

314 East Thayer Avenue

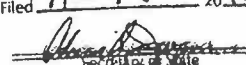
Bismarck ND 58501

As always, thank you for your kind assistance.

Very truly yours,


Kenneth Uva

Vice President

NORTH DAKOTA
Filed 11-18 2010

SECRETARY OF STATE





**AMENDED CERTIFICATE OF AUTHORITY OF
FOREIGN LIMITED PARTNERSHIP OR FOREIGN
LIMITED LIABILITY LIMITED PARTNERSHIP**
SECRETARY OF STATE
SFN 53808 (07-2008)

FOR OFFICE USE ONLY

ID#:	20,513,900
WO#:	767903
Filed:	8-24-11
By:	mDH

SEE REVERSE SIDE FOR FEES, FILING AND MAILING INSTRUCTIONS

A. The application MUST be accompanied by ALL of the following:

- Filing fee of \$40
- If amending the name, a current Certificate of Fact verifying the name change certified by the government officer of the state or country under the laws of which it is organized.

B. The following MAY be required:

- Signed consent to use of name and fee of \$10
- Fictitious Name Certificate and fee of \$25

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TYPE OR PRINT LEGIBLY

For reference, see North Dakota Century Code, Section 45-10.2-81

2. This application applies to (check the <input type="checkbox"/> that defines the type of partnership)		
<input checked="" type="checkbox"/> Limited partnership		<input type="checkbox"/> Limited Liability Limited Partnership
3. Reason for Amended Certificate of Authority		4. Federal ID Number
<input type="checkbox"/> Partnership name change		<input checked="" type="checkbox"/> Other amendment
5. Name of limited partnership or limited liability limited partnership <u>EXACTLY</u> as currently registered with the North Dakota Secretary of State		
Hiland Partners, LP		
6. Name of limited partnership or limited liability limited partnership <u>as amended EXACTLY</u> as it appears on Certificate of Fact from state or country of origin		
7. If applicable, provide the fictitious name and complete the Partnership Fictitious Name Certificate form if the selected fictitious name is not already registered in North Dakota. <u>Only provide the fictitious name in this line if:</u>		
a) The "new" limited partnership or limited liability limited partnership name is not in the form as required of limited partnerships or limited liability limited partnerships in North Dakota.		
b) The Secretary of State has notified the limited partnership or limited liability limited partnership that its "new" name is the same as or deceptively similar to a name already registered, and the limited partnership or limited liability limited partnership is unable to obtain consent to use of name from the previous filer or a certified copy of a decree of a court of competent jurisdiction establishing prior right of this limited partnership or limited liability limited partnership to use of the name in North Dakota.		
c) The limited partnership or limited liability limited partnership does not wish to use or protect its "new" name in North Dakota and chooses to use a name <u>other than its limited partnership or limited liability limited partnership name.</u>		
8. State or Country of Origin	9. Telephone Number	10. Toll-Free Telephone Number
DE	(580) 242-6040	
11. Nature of business or activities the limited partnership or limited liability limited partnership intends to conduct in North Dakota		
Gathering, Compressing and dehydrating gas products and water injection services.		
12.A. Name of <u>commercial</u> registered agent in North Dakota		12.B. Name of <u>noncommercial</u> registered agent in North Dakota
CI Corporation Systems		OR
12.C. Address of <u>noncommercial</u> registered agent in North Dakota: (Street/RR, PO Box, City, State, Zip+4) May not be only a post office box.		
13. <u>Complete</u> address of the principal office which may not only be a post office box: (Street/RR, PO Box if applicable, City, State, Zip+4)		
205 W. Maple, Suite 1100 Enid, OK 73701		
14. The general partners, their Social Security/Federal ID #, and the addresses of their principal places of business: (If needed, attach a sheet to add names of additional general partners)		
NAME	SOCIAL SECURITY/ FEDERAL ID #	COMPLETE ADDRESS PO Box City State Zip+4
Hiland Partners GP Holdings, LLC	760828230	205 W. Maple Suite 1100 Enid OK 73701
15. "The undersigned, a general partner of the limited partnership or limited liability limited partnership, has read the foregoing application, knows the contents thereof, and believes the statements made thereon to be true. I further authorize the Secretary of State to correct numbers 5, 6, 8, 12A and 12B if not correctly reflected."		
Signature		Date
Matthew S. Harrison		8/2/2011
16. Name of person to contact about this document	E-Mail Address	Daytime telephone Number and extension, if any
Matthew S. Harrison		

NOT



CERTIFICATE OF AUTHORITY FOREIGN LIMITED LIABILITY COMPANY
SECRETARY OF STATE
 SFN 19381 (10-2012)

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APR 17 2015



FOR OFFICE USE ONLY

System ID Number	20,513,900	KLC
WO Number	1274673	
Filed	7-17-15	

1. The application is accompanied by the following:

*Filing fee of \$135

*Current CERTIFICATE OF GOOD STANDING or CERTIFICATE OF EXISTENCE duly authenticated by the organizing officer of the state or country of organization

Sec. of State

Certification of professional license

Signed Consent to Use Business Name and fee of \$10

Trade Name Registration and fee of \$25

SEE INSTRUCTIONS FOR FEES, FILING AND MAILING INFORMATION

TYPE OR PRINT LEGIBLY

For reference, see North Dakota Century Code Sections 10-31-01, 10-31-13.1 and 10-32-138.

2. Type of Limited Liability Company Applying for Certificate of Authority (check one)		3. Federal ID Number	
<input checked="" type="checkbox"/> Foreign Business <input type="checkbox"/> Foreign Professional		[REDACTED]	
4. Name of Limited Liability Company EXACTLY as it appears on Certificate of Good Standing from State or Country of Origin Hiland Partners Holdings LLC			
5. If applicable, provide the trade name and complete the Trade Name Registration form if selected trade name is not already registered in North Dakota. Only provide the trade name in this line if: a) The limited liability company name is not in the form as required of limited liability companies in North Dakota. b) The Secretary of State has notified the limited liability company that its name is the same or deceptively similar to a name already registered, and the limited liability company is unable to obtain Consent to Use Business Name from the previous filer or a certified copy of a final decree of a court of competent jurisdiction establishing prior right of this limited liability company to use of the name in North Dakota. c) The limited liability company does not wish to use or protect its name in North Dakota and chooses to use a name other than its limited liability company name.			
6. Complete Address of Principal Executive Office (Street/RR, PO Box, City, State, ZIP+4) which may not be only a post office box 1001 Louisiana Street, Suite 1000, Houston, Texas 77002			
7. State or Country Where Organized Delaware	8. Limited Liability Company Will Expire in State or Country of Origin (check one) <input checked="" type="checkbox"/> Perpetual <input type="checkbox"/> Expires - Specify Date (mm/dd/yyyy):		
9. Telephone Number 713-369-9000	10. Toll-free Telephone Number		
11A. Name of <u>Commercial</u> Registered Agent in North Dakota C T Corporation System		11B. Name of <u>Noncommercial</u> Registered Agent in North Dakota OR	
11C. Address of <u>Noncommercial</u> Registered Agent in North Dakota (Street/RR, PO Box, City, State, ZIP+4) May not be only a post office box.			
12. Nature of Business or Activities the Limited Liability Company Intends to Conduct in North Dakota Own and operate midstream natural gas systems			
13. MANAGERS AND GOVERNORS OF THE LIMITED LIABILITY COMPANY			
MANAGERS	Check box if Manager also serves as Governor	COMPLETE MAILING ADDRESS	
	<input type="checkbox"/>	Street/RR	PO Box City State ZIP+4
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
MANAGING MEMBER		1001 Louisiana Street, Suite 1000, Houston, Texas 77002	
MANAGING MEMBER	Kinder Morgan, Inc.		
If needed, attach sheet to add names of additional managers or governors.			

14. "The undersigned has read the foregoing application, knows the contents, and believes the statements to be true. I further authorize the Secretary of State to correct numbers 4, 7, 11A, 11B, and 11C if not correctly reflected. I understand that if I make a false statement in this document, I may be subject to criminal penalties."

Signature 	Date April 14, 2015
15. Name of Person to Contact about this Document Marcia D. West	Email Address [REDACTED] Daytime Telephone Number and Extension, if any [REDACTED]



**COMMERCIAL OR NONCOMMERCIAL REGISTERED
AGENT/OFFICE STATEMENT OF CHANGE**
SECRETARY OF STATE
SFN 13019 (11-2016)

For Office Use Only	
ID Number:	20513900
WO Number:	1555118
Filed:	8.24.17 By: AS

ONLY complete this form and send payment if:

- Appointing an alternate registered agent (commercial or noncommercial);
- Reflecting a name change of a noncommercial registered agent; or
- Reflecting an address change of a noncommercial registered agent.

1. FILING FEE: \$10.00

NO FEE: To change the address resulting from a postal reassignment, rezoning, or 911 address implementation.

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TYPE OR PRINT LEGIBLY

SEE INSTRUCTIONS ON PAGES 2 AND 3.

For reference, see North Dakota Century Code Chapter 10-01.1.

2. Name of organization changing registered agent/office: (cooperative association, corporation, limited liability company, limited liability partnership, limited partnership, limited liability limited partnership, or real estate investment trust)		3. Federal ID number	
HILAND PARTNERS HOLDINGS LLC			
4A. Name of <u>commercial</u> registered agent in <u>North Dakota</u>	OR	4B. Name of <u>noncommercial</u> registered agent in <u>North Dakota</u> (or new name of current noncommercial registered agent)	
Capitol Corporate Services, Inc.			
4C. Consent of the newly appointed registered agent has been obtained:			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Naming a party as registered agent without prior consent may result in involuntary termination or revocation of the organization. See instructions.) <input type="checkbox"/> Agent not changing			
5A. New address of <u>noncommercial</u> registered agent name in number 4B (It cannot be only a post office box. It must include the noncommercial registered agent's physical address in <u>North Dakota</u> .) If applicable for mailing purposes, a post office box can be added to the physical address.			
Physical address		PO box	
City	State	ZIP code	
5B. Change of address is result of: (check one)			
<input type="checkbox"/> Appointment of a new commercial or noncommercial registered agent <input type="checkbox"/> New location for current noncommercial registered agent <input type="checkbox"/> Postal reassignment, rezoning, or implementation of 911 address			
5C. Is the address in number 5A the same address as the principal place of business for the organization named in number 2?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
6. If a new <u>commercial</u> registered agent or a new <u>noncommercial</u> registered agent has been named in number 4A or 4B, an officer, manager, or other individual authorized by the organization named in number 2 may sign this statement. If only the address of the current noncommercial registered agent is changing or the noncommercial registered agent has changed its name, then the noncommercial registered agent may sign the statement.			
"As required by state law, I certify that: <ul style="list-style-type: none"> • The new commercial registered agent or new noncommercial registered agent named in number 4A or 4B, if applicable, was appointed by a resolution as required by state law, and was adopted by the governing structure of the organization named in number 2; • Consent has been obtained from the newly appointed commercial or noncommercial registered agent; • The new address in number 5A, if applicable, for the current or newly appointed noncommercial registered agent is the same address where the noncommercial registered agent can be located during normal business hours; • The undersigned has read the foregoing statements, knows the contents thereof and believes the same to be true; • The undersigned is authorized to sign the statement; and • The Secretary of State is authorized to correct numbers 2, 4A, 4B, and 5A if not correctly reflected, and I understand that if I make a false statement in the document, I may be subject to criminal penalties." 			
Signature <i>Brian Radecki</i>		Date	
Brian Radecki, Attorney-in-Fact		08/10/2017	
7. Name of person to contact about this document		Email address	
Myra Simmons		[REDACTED]	
		Daytime telephone number	
		[REDACTED]	

State of North Dakota

SECRETARY OF STATE



CERTIFICATE OF CONVERSION OF HILAND PARTNERS, LP

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that a Statement of Conversion of HILAND PARTNERS, LP, a Delaware Limited Partnership into

HILAND PARTNERS HOLDINGS LLC

a Delaware Limited Liability Company duly signed and verified pursuant to North Dakota statutes governing conversions, have been received in this office and are found to conform to law.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Conversion of HILAND PARTNERS, LP into

HILAND PARTNERS HOLDINGS LLC

Effective date of conversion: July 17, 2015

Issue date: July 17, 2015

A handwritten signature in cursive script, reading "Alvin A. Jaeger".

Alvin A. Jaeger
Secretary of State