

PERSONAL FINANCIAL STATEMENT

FORM PFS - LOCAL

Note: A PFS filed with the Texas Ethics Commission must be filed electronically. The only exception is for individuals appointed to office. See the PFS Instruction Guide for more information.

**COVER SHEET
PAGE 1**

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2026, covering calendar year ending December 31, 2025.
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED

Filer ID

1 NAME	TITLE FIRST MI MR. ESTEBAN	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX "STEVE" GUERRA		
2 ADDRESS	ADDRESS / PO BOX APT / SUITE # CITY, STATE ZIP CODE 3106 SAPPHIRE CT. BROWNSVILLE, TX. 77520	Date Received	
		Date Hand-delivered or Date Postmarked	
3 TELEPHONE NUMBER	AREA CODE PHONE NUMBER, EXTENSION (956) 407-8181	Receipt #	Amount \$
		Date Processed	
		Date Imaged	

4 REASON FOR FILING STATEMENT	<input checked="" type="checkbox"/> CANDIDATE CAMERON COUNTY JUDGE (INDICATE OFFICE)
	<input checked="" type="checkbox"/> ELECTED OFFICER OND COMMISSIONER PLACE 4 (INDICATE OFFICE)
	<input type="checkbox"/> OTHER _____ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (see instructions).

SPOUSE **KRYSTAL A. GUERRA**

DEPENDENT CHILD 1. **ANDREA SOFIA GUERRA**

2. **DANIELA ALEXA GUERRA**

3. **ANTHONY REGINA GUERRA**

In Parts 1 through 20, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14 and 20, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

SOURCES OF OCCUPATIONAL INCOME

PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<p>1 INFORMATION RELATES TO</p>	<p><input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____</p>
<p>2 EMPLOYMENT</p> <p><input type="checkbox"/> EMPLOYED BY ANOTHER</p> <hr/> <p><input checked="" type="checkbox"/> SELF-EMPLOYED</p>	<p>NAME AND ADDRESS OF EMPLOYER / POSITION HELD</p> <p><i>SODANA CONSTRUCTION CO., LLC</i> <i>5 CALLE SACARANDA.</i> <i>BROWNSVILLE, TX. 78520</i></p> <p>DOES NOT EXIST</p> <hr/> <p>NATURE OF OCCUPATION</p> <p><i>CONSTRUCTION / REMODELING CONTRACTOR</i></p>
<p>INFORMATION RELATES TO</p>	<p><input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____</p>
<p>EMPLOYMENT</p> <p><input type="checkbox"/> EMPLOYED BY ANOTHER</p> <hr/> <p><input checked="" type="checkbox"/> SELF-EMPLOYED</p>	<p>NAME AND ADDRESS OF EMPLOYER / POSITION HELD</p> <p><i>PAIEM SOLUTIONS GROUP, LLC</i> <i>5 CALLE SACARANDA</i> <i>BROWNSVILLE, TX 78520</i></p> <p>DOES NOT EXIST</p> <hr/> <p>NATURE OF OCCUPATION</p> <p><i>PUBLIC RELATIONS / CONSULTING.</i></p>
<p>INFORMATION RELATES TO</p>	<p><input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____</p>
<p>EMPLOYMENT</p> <p><input type="checkbox"/> EMPLOYED BY ANOTHER</p> <hr/> <p><input checked="" type="checkbox"/> SELF-EMPLOYED</p>	<p>NAME AND ADDRESS OF EMPLOYER / POSITION HELD</p> <p><i>NEW EDGE MARKETING + STRATEGIES, LLC.</i> <i>5 CALLE SACARANDA</i> <i>BROWNSVILLE, TX 78520</i></p> <p>OPENED 3 MONTHS AGO</p> <hr/> <p>NATURE OF OCCUPATION</p> <p><i>MARKETING CONSULTANT</i></p>

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

SOURCES OF OCCUPATIONAL INCOME

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1 INFORMATION RELATES TO	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD EPISCOPAL DAY SCHOOL. 34. N. CORIA. ST. BROWNSVILLE, TX 79520
	NATURE OF OCCUPATION TEACHER / LIBRARIAN.
<input type="checkbox"/> SELF-EMPLOYED	
INFORMATION RELATES TO	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD
	NATURE OF OCCUPATION
<input type="checkbox"/> SELF-EMPLOYED	
INFORMATION RELATES TO	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD
	NATURE OF OCCUPATION
<input type="checkbox"/> SELF-EMPLOYED	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE <i>3106 SADDLE CT. BROWNSVILLE TX 77520.</i>
3 DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	<i>KRYSTAL A. GUDERNA.</i>
5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$11,120 <input type="checkbox"/> \$11,120 - \$22,239 <input type="checkbox"/> \$22,240- \$55,609 <input type="checkbox"/> \$55,610 OR MORE

HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE
DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$11,120 <input type="checkbox"/> \$11,120 - \$22,239 <input type="checkbox"/> \$22,240 - \$55,609 <input type="checkbox"/> \$55,610 OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS**PART 6**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than \$2,220* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	<i>STELLANTIS FINANCIAL SERVICES.</i>
2 LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 GUARANTOR	<i>ESTEBAN GUERRA</i>
4 AMOUNT	<input type="checkbox"/> \$2,220-\$11,119 <input type="checkbox"/> \$11,120-\$22,239 <input checked="" type="checkbox"/> \$22,240-\$55,609 <input type="checkbox"/> \$55,610 OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	<i>VOLVO FINANCIAL SERVICES.</i>
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	<i>ESTEBAN LOPEZ</i>
AMOUNT	<input type="checkbox"/> \$2,220-\$11,119 <input type="checkbox"/> \$11,120-\$22,239 <input checked="" type="checkbox"/> \$22,240-\$55,609 <input type="checkbox"/> \$55,610 OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	<i>CAPITOL ONE BANK</i>
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input checked="" type="checkbox"/> \$2,220-\$11,119 <input type="checkbox"/> \$11,120-\$22,239 <input type="checkbox"/> \$22,240-\$55,609 <input type="checkbox"/> \$55,610 OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 DESCRIPTION	<p style="text-align: right; font-size: small;">NAME AND ADDRESS</p> SODANA CONSTRUCTION CO, LLC. 5 CALLE JACARANDA. BROWNVILLE, TX DOES NOT EXIST
3 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$11,120 <input type="checkbox"/> \$11,120 - \$22,239 <input type="checkbox"/> \$22,240 - \$55,609 <input type="checkbox"/> \$55,610 OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	<p style="text-align: right; font-size: small;">NAME AND ADDRESS</p> PRISM SOLUTIONS GROUP, LLC 5 CALLE JACARANDA BROWNVILLE TX 78520 DOES NOT EXIST
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$11,120 <input type="checkbox"/> \$11,120 - \$22,239 <input type="checkbox"/> \$22,240 - \$55,609 <input type="checkbox"/> \$55,610 OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	<p style="text-align: right; font-size: small;">NAME AND ADDRESS</p> NEW EDGE MARKETING + STRATEGIES, LLC. 5 CALLE JACARANDA BROWNVILLE, TX 78520. OPENED 3 MONTHS AGO
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$11,120 <input type="checkbox"/> \$11,120 - \$22,239 <input type="checkbox"/> \$22,240 - \$55,609 <input type="checkbox"/> \$55,610 OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

OWNERSHIP OF BUSINESS ASSOCIATIONS

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet and **DO NOT** include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS - INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS SODANA CONSTRUCTION CO., LLC 5 CAVE JACARANDA BROWNSVILLE, TX 77520.	DOES NOT EXIST
2 BUSINESS TYPE	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Professional Association <input type="checkbox"/> Firm <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership <input type="checkbox"/> Professional Corporation <input type="checkbox"/> Other	
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD	

BUSINESS ASSOCIATION	NAME AND ADDRESS PRISM BOLLING GROUP 5 CAVE JACARANDA BROWNSVILLE, TX 77520	DOES NOT EXIST
BUSINESS TYPE	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Professional Association <input type="checkbox"/> Firm <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership <input type="checkbox"/> Professional Corporation <input type="checkbox"/> Other	
HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD	

BUSINESS ASSOCIATION	NAME AND ADDRESS NEW EDGE MARKETING STRATEGIES 5 CAVE JACARANDA BROWNSVILLE, TX 77520	OPENED 3 MONTHS AGO
BUSINESS TYPE	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Professional Association <input type="checkbox"/> Firm <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership <input type="checkbox"/> Professional Corporation <input type="checkbox"/> Other	
HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD	

BUSINESS ASSOCIATION	NAME AND ADDRESS	
BUSINESS TYPE	<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Professional Association <input type="checkbox"/> Firm <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Partnership <input type="checkbox"/> Professional Corporation <input type="checkbox"/> Other	
HELD, ACQUIRED, OR SOLD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD	

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BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

¹ ORGANIZATION	BROWNSVILLE NAVIGATION DISTRICT / PORT OF BROWNSVILLE
² POSITION HELD	COMMISSIONER
³ POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	
POSITION HELD	
POSITION HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	
POSITION HELD	
POSITION HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	
POSITION HELD	
POSITION HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	
POSITION HELD	
POSITION HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT SIGNATURE PAGE

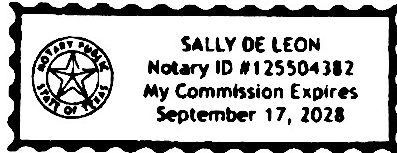
The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement; it must be verified by either being signed in front of a notary or the filer must also fill out the unsworn declaration. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2025, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

E Guerra

Signature of Filer

Please complete either option below:



(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Estaban Guerrero this the 12 day of Feb.

2026 to certify which, witness my hand and seal of office.

[Signature] Sally DeLeon
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____ (month) (year)

Signature of Filer (Declarant)

THE STATE OF TEXAS
2022-DCL-05154-I

Key Performance Petroleum Company § IN THE 445TH DISTRICT COURT
VS § OF
Warrior Fuel Traders, LLC § CAMERON COUNTY, TEXAS

TO **Esteban Guerra**
5 Calle Jacaranda
Brownsville TX 78520 or anywhere else he may be found.

NOTICE TO DEFENDANT: "You have been sued. You may employ an attorney. If you or your attorney do not file a written answer with the clerk who issued this citation by 10:00 a.m. on the Monday next following the expiration of twenty days after you were served this citation and petition, a default judgment may be taken against you. In addition to filing a written answer with the clerk, you may be required to make initial disclosures to the other parties of this suit. These disclosures generally must be made no later than 30 days after you file your answer with the clerk. Find out more at TexasLawHelp.org." TRCP. 99

You are hereby commanded to appear by filing a written answer to **Plaintiff's Original Petition** at or before 10:00 o'clock A.M. on the Monday next after the expiration of 20 days after the date of service of this citation before the Honorable 445th District Court of Cameron County, at the Courthouse in said County in Brownsville, Texas. Said **Plaintiff's Original Petition** was filed in said court on **October 26, 2022**, in the above entitled cause.

2022-DCL-05154-I

Key Performance Petroleum Company f/k/a
Kolkhorst Petroleum Company
vs.
Warrior Fuel Traders, LLC, Cesar A Guerrero and
Esteban Guerra

The nature of Petitioner's demand is fully shown by a true and correct copy of **Plaintiff's Original Petition** accompanying this citation and made a part hereof.

The officer executing this writ shall promptly serve the same according to requirements of law, and the mandates thereof, and make due return as the law directs.

Issued and given under my hand and seal of said Court at Brownsville, Texas, on this the 27th day of October, 2022.

ATTORNEY:

Rebecca L Brown
24087223
210-963-5733
24165 IH-10 W STE 217-418
San Antonio TX 78257



Laura Perez-Reyes
District Clerk of Cameron County
974 E Harrison St.
Brownsville, Texas 78520
2022-10-27 12:36:32 PM

By: _____
Abigail Torres De Resendez, Deputy Clerk

5. As a result of Warrior Fuel Traders, LLC's failure to pay the amounts owed on its account with Plaintiff, Plaintiff was forced to employ the Wright Law Group, PLLC to file this suit.

6. The records attached to Plaintiff's Petition as Exhibit A are kept by Plaintiff in the regular course of business, and it was the regular course of business of Plaintiff for an employee or representative of Plaintiff, with knowledge of the act, event, condition, opinion, or diagnosis that was recorded, to make this record or to transmit the information to be included in this record. The record was made at or near the time or reasonably soon after the act, event, condition, opinion, or diagnosis that was recorded. The records attached to the Plaintiff's Petition as Exhibit A are the originals or exact duplicates of the originals.

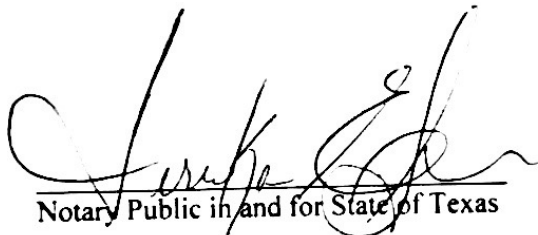
7. I have read Plaintiff's Original Petition against Warrior Fuel Traders, LLC. The facts stated in it are within my personal knowledge and are true and correct."

Further affiant sayeth naught.

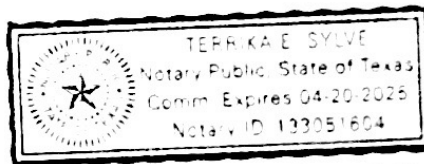


Mark Jackson

SIGNED and SWORN TO before me this the 21st day of October, 2022.



Notary Public in and for State of Texas



Notary Seal

THE STATE OF TEXAS

2022-DCL-05154-I

Key Performance Petroleum Company § IN THE 445TH DISTRICT COURT
VS § OF
Warrior Fuel Traders, LLC § CAMERON COUNTY, TEXAS

TO **Warrior Fuel Traders, LLC**
By Serving It's Registered Agent
Cesar A Guerrero
1313 East Alton Gloor Sulte I-5
Brownsville TX 78526

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2022-DCL-05154-I

Key Performance Petroleum Company f/k/a Kolkhorst
Petroleum Company
vs.
Warrior Fuel Traders, LLC, Cesar A Guerrero and
Esteban Guerra

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Issued and given under my hand and seal of said Court at Brownsville, Texas, on this the 27th day of October, 2022.

ATTORNEY:
Rebecca L Brown
24087223
210-963-5733
24165 IH-10 W STE 217-418
San Antonio TX 78257



Laura Perez-Reyes
District Clerk of Cameron County
974 E Harrison St.
Brownsville, Texas 78520
Signed: 10/27/2022 12:44:41 PM

By: _____
Abigail Torres De Resendez, Deputy Clerk