

**B100000000168**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368**L. SELLERS**

OCT 18 2010

**EXAMINER**

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

RECEIVED

10 OCT 12 PM 2:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LP/LLLP****Whole Foods Market IP, L.P.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,000.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 OCT 12 AM 10:26

**FILED**

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP  
TO TRANSACT BUSINESS IN FLORIDA

1. Whole Foods Market IP, L.P.  
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.,  
or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership  
proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware 3. September 22, 1999  
State or Country of Formation Date of Formation

4. CT Corporation System  
Name of Registered Agent for Service of Process

5. 1200 South Pine Island Road  
Florida street address for Registered Agent  
Plantation, FL 33324

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to  
comply with the provisions of all statutes relative to the proper and complete performance of my duties,  
and I am familiar with and accept the obligations of my position as registered agent.

Jane Zachritz  
Signature of Registered Agent

Jane Zachritz  
Assistant Secretary

7. 550 Bowie Street, Austin, TX 78703  
Principal office address

8. If limited partnership is a limited liability limited partnership, check box ☐

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SECRETARY OF STATE  
TREASURER, FLORIDA

9. 550 Bowie Street, Austin, TX 78703  
(Mailing address)

_____	_____
Name	Street Address
_____	_____
_____	_____
_____	Mailing Address
_____	_____
_____	_____
Name	Street Address
_____	_____
_____	_____
_____	Mailing Address
_____	_____


11. Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 30<sup>th</sup> day of September, 20 10

Signature of a general partner: WFM IP MANAGEMENT, INC.

By   
 Patricia D. Yost, Asst. Secretary

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$ 52.50
Certificate of Status (optional):	\$ 8.75

# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WHOLE FOODS MARKET IP, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

3100638 8300

100950264

You may verify this certificate online  
at [corp.delaware.gov/authover.shtml](http://corp.delaware.gov/authover.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8256895

DATE: 09-28-10