

**B150000248**

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To:

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

From:

Account Name : FOLEY & LARDNER  
Account Number : 072720000061  
Phone : (904) 359-2000  
Fax Number : (904) 359-8700

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

Email Address: tstringfellow@foley.com

**FLORIDA/FOREIGN LP/LLLP  
PSL Wiregrass, LP**

Certificate of Status	0
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104880.0107/2268

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September 4, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FOLEY &amp; LARDNER

SUBJECT: PSL WIREGRASS, LP  
REF: W15000038687

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist IIFAX Aud. #: H15000212883  
Letter Number: 015A000187572015 SEP 16 A 10:05  
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA  
CALL 850-245-6051

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

1. PSL Wiregrass, LP

(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.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. Texas

State or Country of Formation

3. August 26, 2015

Date of Formation

4. Federal Employer Identification Number: Applied for

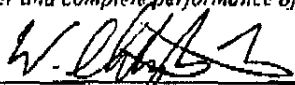
5. Name of Registered Agent for Service of Process and Florida Street Address:

F&L Corp.

One Independent Drive, Ste 1300

Jacksonville, FL 32202

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.



Signature of Registered Agent

7. Principal Office:

8214 Westchester Drive

Suite 600

Dallas, Texas 75225

8. Mailing Address:

8214 Westchester Drive

Suite 600

Dallas, Texas 75225

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TALLAHASSEE, FLORIDA

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9. If limited partnership is a limited liability limited partnership, check box.

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: GP PSL Wiregrass, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 8214 Westchester Drive, Suite 600

Street Address: \_\_\_\_\_

Dallas, Texas 75225

Mailing Address: 8214 Westchester Drive, Suite 600

Mailing Address: \_\_\_\_\_

Dallas, Texas 75225

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
Mailing 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 2nd day of September, 2015

H. D. McCall  
Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

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TALLAHASSEE, FLORIDA

Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



Carlos H. Cascos  
Secretary of State

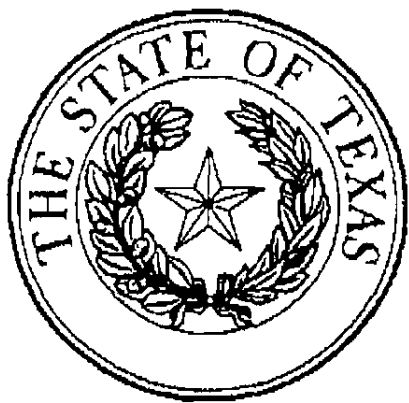
## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for PSL Wiregrass, LP (file number 802281364), a Domestic Limited Partnership (LP), was filed in this office on August 26, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 04, 2015.



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos  
Secretary of State