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Florida Department of State
Division of Corporations
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To:
Division of Corporations
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FLORIDA/FOREIGN LP/LLP
Whitefish Number One, L.P.

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EXAMINER

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

1. Whitefish Number One, 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. Mississippi

State or Country of Formation

3. 9/20/2005

Date of Formation

4. Federal Employer Identification Number: 20-3506392

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

Richard Sherrill, Esq.125 East Intendencia StreetPensacola, FL 32502

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.

Richard J. Sherrill
Signature of Registered Agent

7. Principal Office:

300 Concourse Blvd., Ste. 101Ridgeland, MS 39157

8. Mailing Address:

300 Concourse Blvd., Ste. 101Ridgeland, MS 391579. 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: Wirt A. Yerger III

Name of General Partner: _____

Street Address: 300 Concourse Blvd., Ste. 101

Street Address: _____

Ridgeland, MS 39157Mailing Address: 300 Concourse Blvd., Ste. 101

Mailing Address: _____

Ridgeland, MS 39157

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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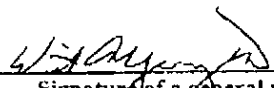
Name of General Partner: _____ Name of General Partner: _____
Street Address: _____ Street Address: _____

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.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 20th day of December, 2018



Signature of a general partner

The individual signing this document affirms 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.317.155, 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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CLERK OF STATE
TALLAHASSEE, FLORIDA

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DELBERT HOSEMANN
Secretary of State

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Partnership ACT to be filed in my office do hereby certify that:

WHITEFISH NUMBER ONE, L.P.

Formed the 20th day of September, 2005

A Mississippi Limited Partnership has filed the necessary documents in this office and has obtained a certificate of Limited Partnership under the provisions of The Mississippi Limited Partnership Act as shown by the records in this office.

That the registered office of said partnership is located at:

300 Concourse Blvd Suite 101
Ridgeland, MS 39157

and that the registered agent at that address is

Yerger, Wirt Adams, III

I further certify that said Limited Partnership has paid the fees for filing the above papers as required by law as shown by the records of this office and that said partnership is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office
the 13th day of November, 2018

C. Delbert Hosemann, Jr.

C. DELBERT HOSEMANN, JR.
Secretary of State

Certificate Number: CN18059248

Verify this certificate online at <http://corp.sos.ms.gov/corpcorv/verifycertificate.aspx>

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