Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000270055 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL IN

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:\_

## FLORIDA/FOREIGN LP/LLLP Weatherford Capital Fund II, LP

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$1,008.75

S. ROBERTS

-

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

Acceptable Limited P	mited Partnership or Limited Liab artnership suffixes: Limited Partner	pility Limited Partnership, which must inclusion in the ship, Limited, L.P., LP, or Ltd.  Limited Liability Limited Partnership, L.L.L			
If name unavailable		ership or limited liability limited partnership pida; must contain acceptable suffix.	roposes to reg	ister to t	ransact
2. Delaware		3			
	ite or Country of Formation	Date of Formatio	n		
4. Federal Employer	r Identification Number:				
5. Name of Register	ed Agent for Service of Process and	l Florida Street Address:			
Corporate Creations	Network Inc.				
801 US Highway 1					
North Palm Beach, F	Torida 33408				
6. I hereby accept the of all statutes relamy position as regi	tive to the proper and complete perfo stered agent.	nd agree to act in this capacity. I further agree ormance of my duties, and I am familiar with a function of Registered Agent	to comply wit nd accept the	th the pr obligation	ovision. ons of
7. Principal Office:		8. Mailing Address:			
100 N Tampa Street,	Suite 2320	100 N Tampa Street, Suite 2320	ć	2	
Tampa, Florida 33602		Tampa, Florida 33602	<del></del>	2422 AUG	. ,
			<u> </u>	<u>S</u>	k ;
				2 -	
9. If limited partner	rship is a limited liability limited pa	artnership, check box. 🗆		AH	* *
	office address, and mailing addres			ծ։	•
Name of General	Partner: Weatherford Capital Fund I	I GP, LLC Name of General Partner:		<u> </u>	
	100 N Tampa Street, Suite 2320	Street Address:			
	Tampa, Florida 33602				
	100 N Tampa Street, Suite 2320	Mailing Address:			
	Tampa Florida 33602				
Name of General	Partner:	Name of General Partner:			
		Street Address:			
Mailing Address:		Mailing Address:			

## Page 1 of 2

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 Note: If the date inserted in this block does not mee document's effective date on the Department of States	days after the date this document is filed by the Florida Department of State.) the applicable statutory filing requirements, this date will not be listed as the				
	ticated, not more than 90 days prior to the delivery of this application to the te or other official having custody of the entity's records in the jurisdiction under				
Signed this 8th day of Augu	st				
Signature of a general partner					
The individual signing this document affirms that th	e 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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## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WEATHERFORD CAPITAL FUND II, LP" 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 TENTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WEATHERFORD CAPITAL FUND II, LP" WAS FORMED ON THE NINTH DAY OF AUGUST, A.D. 2022.

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

at corp.delaware.gov/aut

Authentication: 204127537

Date: 08-10-22