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| (Requestor's Name) | |
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| (City/State/Zip/Phone #) | _ |
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| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | |
| (Dasiness Entry Name) | |
| | |
| (Document Number) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | - |
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SEP 24 AN II: 32

| Holland & Knight LLP Requester's Name 315 So. Calhoun Street Address 425-5675 City/State/Zip Phone # | | AND PHOSPEC STATE OF THE PARTY |
|---|--|---|
| CORPORATION NAME(S) & DOCUM | | ffice Use Only |
| 1. WHITE DEER PRODUCTION (Corporation Name) | | |
| 2. (Corporation Name) | (Document #) | |
| 3(Corporation Name) | (Document #) | |
| 4. (Corporation Name) | (Document #) | |
| ☐ Walk in ☐ Pick up time | | Certified Copy |
| Mail out Will wait | Photocopy | Certificate of Status |
| NEW FILINGS | <u>AMENDMENTS</u> | |
| ☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other | Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger | d Agent |
| OTHER FILINGS | REGISTRATION/QUA | LIFICATION |
| ☐ Annual Report ☐ Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other | |
| | | Examiner's Initials |

CR2E031(7/97)

TRANSMITTAL LETTER

| | | TAL LETTER | OF SEP 24 PH 2:58 |
|--|--|---|--|
| TO: Registration Sec Division of Corp | | | E. E. C. L. |
| SUBJECT: White De | er Production Company, In | с. | ORDITE OR |
| | (Name of corpor | ration - must include suffix) | 7 |
| Dear Sir or Madam: | | | |
| | ," and check are submitted | for Authorization to Transacto register the above referen | |
| Please return all correspondent | ondence concerning this ma | atter to the following: | |
| Sahdra G. Sheets | | | |
| | (Name | e of Person) | |
| Holland & Knight LLP | | | |
| | (Firm | /Company) | |
| 92 Lake Wire Drive | | | |
| | (A | (ddress) | |
| Lakeland, FL 33815 | | | |
| | (City/Sta | ate and Zip code) | |
| For further information of | concerning this matter, plea | se call: | |
| Sandra G. Sheets | at (863 |) 499-5348 | |
| (Name of Perso | n) (Ar | ea Code & Daytime Telepho | one Number) |
| STREET ADDI | | MAILING AI | |
| Registration Sec Division of Corp | | Registration S Division of Co | |
| 409 E. Gaines St | 409 E. Gaines St. P.O. Box 6327 | | 7 |
| Tallahassee, FL | 32399 | Tallahassee, F | L 32314 |
| Enclosed is a check for t | he following amount: | | |
| ☐ \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| | roduction Company, Inc. | £ 2 |
|----------------------------------|--|---|
| (Enter name of "Inc.," "Co.," "C | corporation; must include "INCORPORATE! Corp," "Inc," "Co," or "Corp.") | D," "COMPANY," "CORPORATION," |
| | | ne adopted for the purpose of transacting business in Florida) |
| Delaware | 3 | 3 13-3004165 |
| | under the law of which it is incorporated) | (FEI number, if applicable) |
| November 14 | , 19795 | 5. Perpetual |
| (Dat | e of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") |
| · | | |
| | | in Florida, if prior to registration) 1502, F.S., to determine penalty liability) |
| c/o Krant & Bia | lick, 575 Lexington Avenue, New York, N | |
| | (Principal office ad | ldress) |
| 92 Lake Wire I | Drive, Lakeland, FL 33815 | |
| | (Current mailing ad | ldress) |
| Family busine | SS | |
| · _ | s) of corporation authorized in home state or | country to be carried out in state of Florida) |
| . Name and stre | et address of Florida registered agent: (P. | .O. Box NOT acceptable) |
| | Intrastate Registered Agent Corporation | on |
| Name: | | |
| | 701 Brickell Avenue | |
| Name: | 701 Brickell Avenue Miami | , Florida 33131 |

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

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

| A: DIRECTORS . |
|---|
| Chairman: |
| Address: |
| |
| Vice Chairman: |
| Address: |
| |
| Director: William B. O'Boyle |
| Address: P. O. Box 832 |
| Lake Wales, FL 33859 |
| Director: |
| Address: |
| |
| B. OFFICERS |
| President: William B. O'Boyle |
| Address: P. O. Box 832 |
| Lake Wales, FL 33859 |
| Vice President: |
| Address: |
| |
| Secretary: |
| Address: |
| Treasurer: |
| Address: |
| |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 13. (Signature of Director or Officer listed in number 12 of the application) |
| |
| 14. William B. O'Boyle, President |
| (Typed or printed name and capacity of person signing application) |



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WHITE DEER PRODUCTION COMPANY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF AUGUST, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WHITE DEER PRODUCTION COMPANY, INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 1979.

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



Warriet Smith Windson Harriet Smith Windson

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040569457

AUTHENTICATION: 3274378

DATE: 08-04-04