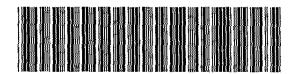
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| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | idress)            | <del></del> |
| (Ac                     | ldress)            |             |
| (Ci                     | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | usiness Entity Nar | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | Certificates       | s of Status |
| Special Instructions to | Filing Officer:    |             |

Office Use Only



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SECRETARY DE SIAJE

## WATKINS & EAGER

A Professional Limited Liability Company

### Attorneys and Counselors at Law

THE EMPORIUM BUILDING SHITE 300 400 EAST CAPITOL STREET JACKSON, MISSISSIPPI 39201 TELEPHONE: (601) 948-6470 FACSIMILE: (601) 354-3623

ipoulson@watkinscager.com DIRECT DIAL: 601.965.1805 FACSIMILE: 601.965.1812

March 30, 2007

## VIA FEDERAL EXPRESS

Florida Dept. of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Attn: Mr. Buck Kohr

envelope enclosed herein.

MAILING ADDRESS:

POST OFFICE BOX 650

JACKSON, MISSISSIPPI 39205

Re: Wataga, L.L.C. Dear Buck, Per our conversation, enclosed please find an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Wataga, L.L.C., a Mississippi limited liability company. I have also enclosed a check in the amount of \$160.00 to cover the

filing fee for the application, as well as the cost of a Certificate of Status and certified copies. Upon filing, Please return the requested items to my attention, using the prepaid overnight

Thank you for your assistance. Please do not hesitate to contact me at any time with any comments or questions that you may have.

Regards,

Jason L. Poulson



# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



Attached are the instructions to register a foreign limited liability company to transact business in Florida. The requirements are as follows:

- Pursuant to s.608.503(1), Florida Statutes, the attached application must be completed in its entirety.
- The foreign limited liability company **must** submit an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- > The fees to register are as follows:

| \$<br>100.00 | Filing Fee for Application       |
|--------------|----------------------------------|
| \$<br>25.00  | Designation of Registered Agent  |
| \$<br>30.00  | Certified Copy (optional)        |
| \$<br>5.00   | Certificate of Status (optional) |

- A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.
- A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## **STREET/COURIER ADDRESS:**

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **COVER LETTER**

| COV  | ER LETTER  | THE STATE OF THE S |
|--|--|--|
| TO: Registration Section Division of Corporations  |  | THE SEE THE STATE OF  |
| SUBJECT: Wataga, L.L.C.  |  | _ 70,00  |
| (Name of Lim   | ited Liability Company)  | The second   |
| The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are suliability company to transact business in Florida | · · · · · · · · · · · · · · · · · · ·  |  |
| Please return all correspondence concerning this n   | natter to the following:   |  |
| Jason L. Poulson, Esq.   |  |  |
| (Na  | ame of Person)   |  |
| Watkins & Eager, PLLC  | rm/Company)  |  |
| 400 East Capitol Street  | in Company)  |  |
|  | (Address)  |  |
| Jackson, MS 39201  |  | <del> </del>   |
| (City/St   | tate and Zip Code)   |  |
| For further information concerning this matter, ple  | ease call:   |  |
| Jason L. Poulson   | at ( 601 _ ) 965-1805 _  |  |
| (Name of Person)   | (Area Code & Daytime Telepho   | one Number)  |
| MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  | STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |  |
| Enclosed is a check for the following amount:  \$\Begin{array}{c} \pm \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \                                 |  | Filing Fee, Certificate of Status & Certified Copy   |

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. Wataga, L.L.C.   | 9 ,           |
|---|---------------|
| (Name of Foreign Limited Liability Company)   | 780           |
| 2. Mississippi (Jurisdiction under the law of which foreign limited liability company is organized)  3. 72-1373034 (FBI number, if applicable)  | 受力            |
| 4. January 26, 1996  (Date of Organization)  5. December 31, 2045  (Duration: Year limited liability company will cease exist or "perpetual")   | Se la O       |
| 6. Upon Qualification  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)   | AND P         |
| 7. 755 Avignon Drive, Building 18   |               |
| Ridgeland, MS 39158-1260 (Street Address of Principal Office)   | <del>10</del> |
| 8. If limited liability company is a manager-managed company, check here  |               |
| 9. The name and usual business addresses of the managing members or managers are as follows:  |               |
| Gary B. Cress   |               |
| 755 Avignon Drive, Building 18  |               |
| Ridgeland, MS 39158-1260  | 27            |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custod the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langual translation of the certificate under each of the translation must be submitted.)  11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate |               |
|   |               |
| B-/4/Q-   | . ,           |
| Signature of a member of an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)   |               |
| Gary B. Cress  Typed or printed name of signee  |               |
| Them or himme more at differen  |               |

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| Wataga, I   | L.L.C.                        |  | : |
|-------------|-------------------------------|--|---|
| 2. The name | and the Florida street addres | ss of the registered agent and office are: |   |
|             | C T Corporation Sy            | rstem                                      |   |
|             |                               | (Name)                                     |   |
|             | 1200 South Pine I             | Island Road                                |   |
|             | Florida Street A              | ddress (P.O. Box <u>NOT</u> ACCEPTABLE)    |   |
|             | Plantation                    | FL 33324                                   |   |
|             |                               | City/State/Zip                             |   |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Carlara aBuse
(Signature)

Barbara A. Burke Special Assistant Secretary

| \$ 100.00 | Filing Fee for Application       |
|-----------|----------------------------------|
| \$ 25.00  | Designation of Registered Agent  |
| \$ 30.00  | Certified Copy (optional)        |
| \$ 5.00   | Certificate of Status (optional) |

# State of Mississippi

# Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

#### CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

WATAGA, L.L.C.

Formed January 26, 1996

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

That the registered office of said Limited Liability Company is located at:

460 BRIARWOOD DR #400 JACKSON MS 39206

and that the registered agent at that address is:

GARY B CRESS

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

A STATE OF MISSES

Given under my hand and seal of office March 28, 2007

Tic Clark

ERIC CLARK
Secretary of State

Certification Number: 8906398-1 Page 1 of 1 Reference: Tracy Larham-EM Verify this certificate online at http://www.scs.state.ms,us/busserv/corp/verify