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**EXAMINER** 



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SECTION OF STATE

14 JUL 22 PM 1:0

#### **COVER LETTER**

Division of Corporations
SUBJECT: WAKA LLC (Name of Foreign Limited Liability Company)
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joey CROW (Name of Person)  WAKA LLC (Firm/Company)  P.O. BOX 576  (Address)
Front Royal VA 22630 (City/State and Zip Code)
For further information concerning this matter, please call:
Joey CROW at, 540, 837, 2457  (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Englaced is a sheek for the following amount:

\$55 Filing Fee & Certified Copy

□ \$60 Filing Fee,

Certified Copy

Certificate of Status &

\$30 Filing Fee & Certificate of Status

2 0328

□ \$25 Filing Fee

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

#### SECTION I (1-3 must be completed)

A STATE OF THE STATE OF THE STATE OF

	ame of limited liability company as it appears on the records of the Florida Department of ate:
2. Ju	urisdiction of its organization was a supplied to the supplied of the supplied
3. D	ate authorized to do business in Florida: 1/27/10
	SECTION II (4-7 complete only the applicable changes)
4. If cha	the amendment changes the name of the limited liability company, when was the ange effected under the laws of its jurisdiction of organization?
5. N	ew name of the limited liability company: WAKA KICKBAI, LLC (must end with "Limited Liability Company, "L.L.C.," or "LLC.")
Florion the all or "L	the amendment changes the period of duration, indicate new period of duration:
_	The Control of the Co
	the amendment changes the jurisdiction of organization, indicate new jurisdiction:
8. If	the amendment corrects any false statement, indicate the statement being corrected and the rrection:
an	ttached is an original certificate, no more than 90 days old, evidencing the aforementioned nendment(s), duly authenticated by the official having custody of records in the flurisdiction order the law of which this entity is organized.  Signature of a member or the authorized representative of a member
	Typed of printed name of signee

Filing Fee: \$25.00

## Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF FORMATION OF "WAKA KICKBALL, LLC",

FILED IN THIS OFFICE ON THE THIRD DAY OF DECEMBER, A.D. 2010, AT

2:10 O'CLOCK P.M.

1907072 8100

110799528

You may verify this certificate online

٠.

Jeffrey W. Bullock, Secretary of State

DATE: 07-12-11

AUTHENTICATION: 8897

State of Delaware
Secretary of State
Division of Corporations
Delivered 02:13 PM 12/03/2010
FILED 02:10 PM 12/03/2010
SRV 101147053 ~ 4907072 FILE

#### CERTIFICATE OF FORMATION OF WAKA KICKBALL, LLC

The undersigned, an authorized natural person, for the purpose of forming a limited liability company, under the provisions and subject to the requirements of the State of Delaware (particularly Chapter 18, Title 6 of the Delaware Code and the acts amendatory thereof and supplemental thereto, and known, identified, and referred to as the "Delaware Limited Liability Company Act"), hereby certifies that:

FIRST: The name of the limited liability company (hereinafter called the "Company") is WAKA Kickball, LLC.

SECOND: The name of the registered agent of the Company required to be maintained by Section 18-104 of the Delaware Limited Liability Company Act is Corporation Service Company and the address at which such registered agent is located is 2711 Centerville Road, Suite 400, Wilmington, DE 19808, New Castle County.

Dated: November 30, 2010

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David Lowry, Authorized Person