M12000005952

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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ALLANASSEE FLORIDA

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ACCOUNT NO. : 12000000195				
REFERENCE : 389695 4304417				
AUTHORIZATION : Conclude Man				
COST LIMIT : \$ 125-00				
ORDER DATE: October 22, 2012				
ORDER TIME : 6:22 PM				
ORDER NO. : 389695-015				
CUSTOMER NO: 4304417				
<u>FOREIGN FILINGS</u> NAME: WA-RPB LLC				
XXXX QUALIFICATION (TYPE: <u>LL</u>)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Susie Knight EXT# 52956				
EXAMINER:				

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: WA-RPB LLC				
Name of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
Please return all correspondence concerning this matter to the following:				
MARILYN ROTHSCHILD				
Name of Person				
Firm/Company				
600 CENTRAL AVENUE, SUITE 365				
Address				
HIGHLAND PARK, ILLINOIS 60035-3257				
City/State and Zip Code				
Mrothschild@NCIS600.com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Tot that the thrombaton concerning this mater, prease eath.				
MARILYN ROTHSCHILD at (847) 432-3666 Name of Person Area Code & Daytime Telephone Number				
Name of Person Area Code & Daytime Telephone Number				
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section				
P.O. Box 6327 Clifton Building				
Tullahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certificate of Status S155.00 Filing Fee & S160.00 Filing Fee, Certificate Copy				

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA SCATUITS, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: WA-RPB LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 90-0899258 (FEI number, if applicable) 2._DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 5. PERPETUAL 4. OCTOBER 1, 2012 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 698.502 F.S. to determine penalty liability) 7 600 CENTRAL AVENUE, SUITE 365 HIGHLAND PARK, ILLINOIS 60035-3257 (Street Address of Principal Office) 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: MANAGER: SP MANAGER LLC 600 CENTRAL AVENUE, SUITE 365 HIGHLAND PARK, ILLINOIS 60035-3257 10. Attached is an original certificate of existence, no more than 90 days old, duly authoriticated 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 cutificate is in a foreign language, a translation of the certificate under ceth of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: SEE ATTACHED PURPOSE Signature of a member or 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, I am aware that any 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.)

SUSAN WAGNER, MEMBER

Typed or printed name of signee

WA-RPB LLC -

Purpose.

- The nature of the business and of the purposes to be conducted and promoted by the Company, are to engage solely in the following activities:
 - To own that certain parcel of real property, together with all improvements located thereon, in the City of Royal Palm, State of Florida, commonly known as 330 Business Parkway, Royal Palm, FL 33411 (collectively, the "Property").
 - To own, hold, sell, assign, transfer, operate, lease, mortgage, pledge and otherwise deal with the Property.
 - To exercise all powers enumerated in the Act necessary or convenient to the conduct, promotion or attainment of the business or purposes otherwise set forth herein.
- After the Company has no obligation with respect to the Loan (as hereinafter defined), the business of the Company shall be to conduct any lawful business whatsoever that may be conducted by limited liability companies pursuant to the Act.

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.

1. The name of the Limited Liability Co	ompany is:	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street addre	ess of the registered agent and office are:	. <u></u>
JEFFREY S. FELNEI		
	(Name)	
6235 FLORIDIAN (CIRCLE	•
Florida Street	Address (F.O. Dov. <u>NOT</u> ACCEPTABLE)	
LAKE WORTH	_{FL} 33463	
	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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "WA-RPB LLC" 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 TWENTY-SECOND DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WA-RPB LLC"
WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5220723 8300

121153506

AUTHENTY CATION: 9934445

DATE: 10-22-12

You may verify this certificate online at corp.delaware.gov/authver.shtml