# M14000002584

(Re	questor's Name)			
(Ad	ldress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



400258809784

04/14/14--01044--011 \*\*130.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

WRH Partners II, 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:

# Josephine Carbone

Name of Person

# W.R. Huff Asset Management Co., LLC

Firm/Company

67 Park Place, 9th Floor

Address

Morristown, NJ 07960

City/State and Zip Code

## jcar@huffcompanies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

## Josephine Carbone

.,973

490-6156

Name of Contact Person

Area Code

Daytime Telephone Number

#### **MAILING ADDRESS:**

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

#### STREET ADDRESS:

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

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

■ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 WRH Partners II, 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. The alternate name must includ Liability Company," "L.L.C," or "LLC.")	e "Limited
<sub>2</sub> Delaware <sub>3, 22-3736537</sub>	
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)	<del></del>
4. January 1, 2014	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
<sub>5.</sub> 2100 S.E. Ocean Boulevard, Suite 103	2114
Stuart, FL 34996	in its
(Street Address of Principal Office)	· · · · · · · · · · · · · · · · · · ·
6. 2100 S.E. Ocean Boulevard, Suite 103	
Stuart, FL 34996	
(Mailing Address)	इल क
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are	:
William R. Huff, President of Managing Member	
2100 S.E. Ocean Boulevard, Suite 103	
Stuart, FL 34996	<del></del>
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by th having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the must be submitted)  Signature of an authorized person  (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts state 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	not translator ed herein are true.
Josephine Carbone	
Typed or printed name of signee	

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability artners II, LL(	,	
If unavailable,	, the alternate to be use	ed in the state of Florida is:	
2. The name a	and the Florida street a	ddress of the registered agent and office are:	
	Cathy Mark		
		(Name)	题言后
	2100 S.E C	cean Boulevard	ANG 2 0
	Florida S	treet Address (P.O. Box NOT ACCEPTABLE)	FLORID
	Stuart	34996	TE TO A
	-	City/State/7in	

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 605, 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)



PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "WRH PARTNERS II, L.L.C." 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 NINTH DAY OF APRIL, A.D. 2014.

3124900 8300

140446444

AUTHENTY CATION: 1278723

DATE: 04-09-14

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