M14000006 F02

| (Re | equestor's Name) | | | |
|--------------------------|--------------------|--------------|--|--|
| (Ac | dress) | | | |
| (Ac | idress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | ısiness Entity Nam | e) | | |
| (Do | ocument Number) | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to | Filing Officer: | | | |
| | | | | |
| <u>.</u> | | | | |
| | | | | |
| | | | | |

Office Use Only



100263682811

09/02/14--01030--013 **125.00

14 SEP 22 PH 3: 35
SECRETARY OF STATE
TALLAHASSEF FINANCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2014

LEIGH TAYLOR 5001 PLAZA ON THE LAKE SUITE 200 AUSTIN, TX 78746

SUBJECT: JEFF 1, LLC

Ref. Number: W14000054889

We have received your document for JEFF 1, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 814A00019175

COVER LETTER

| | Registration Section Division of Corporations |
|-----------|---|
| our m | JEFF 1, LLC |
| SUBJEC | Name of Limited Liability Company |
| | osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |
| Please re | turn all correspondence concerning this matter to the following: |
| | Leigh Taylor |
| | Name of Person |
| | Amherst |
| | Firm/Company |
| | 5001 Plaza on the Lake Suite 200 |
| | Address |
| | Austin, TX 78746 |
| | City/State and Zip Code |
| | Itaylor@amherst.com |
| | E-mail address: (to be used for future annual report notification) |
| For furth | er information concerning this matter, please call: |
| | Leigh Taylor512342-3048 |
| | Name of Contact Person Area Code Daytime Telephone Number |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Clifton Building Tallahassee, FL 32301 STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32301 |
| | ed is a check for the following amount: \$\Pi\$ \$125.00 Filing Fee \$\Pi\$ \$130.00 Filing Fee & \$\Pi\$ \$155.00 Filing Fee & \$\Pi\$ \$160.00 Filing Fee, Certificate Certificate of Status \$\Pi\$ Certified Copy 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: JEFF 1. 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 include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) 8/6/2014 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5001 Plaza on the Lake, Suite 200 Austin, TX 78746 (Street Address of Principal Office) _{6.} same (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage-is/are: Vaca Morada Partners, LP - MGRM 5001 Plaza on the Lake, Suite 200 Austin, TX 78746 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the efficial 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) 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 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.)

Typed or printed name of signee

Tom Wilkinson

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.

| 1. The name of the L JEFF 1, LLC | imited Liability Company is: | | | |
|--|--|---|-------|---|
| If unavailable, the alt | ernate to be used in the state of F | lorida is: | | |
| 2. The name and the | Florida street address of the regis | stered agent and office are: | | |
| Ca | pitol Corporate Ser | vices, Inc. | | |
| | (Name) | | | |
| 15 | 5 Office Plaza Drive | e, Suite A | | |
| | Florida Street Address (P.O. B | OX NOT ACCEPTABLE) | | |
| Talla | ahassee F | _ 32301 | 4 SEP | un việt s |
| | City/Sta | ite/Zip | 22 | Energy Strange |
| liability company at the registered agent and a statutes relating to the | ne place designated in this certific agree to act in this capacity. I fur aproper and complete performance | ervice of process for the above stated limited ate, I hereby accept the appointment as the contract the agree to comply with the provisions of allowed for any duties, and I am familiar with and at a provided for in Chapter 605, Florida | ယ္ | Summary and a summary and a summary |

Ollanii Case, asst-sec.
(Signature)

Statutes.

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

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.

| | e alternate to be used in | the state of Florida is: | |
|--|---|---|---|
| | | | |
| 2. The name and | I the Florida street addres | ss of the registered agent and office are: | |
| | Capitol Corpor | rate Services, Inc. | |
| | <u> </u> | (Name) | - |
| | 155 Office Pla | za Drive, Suite A | o f |
| • | Florida Street A | Address (P.O. Box NOT ACCEPTABLE) | SE SE |
| | Tallahassee | FL 32301 | SEP |
| | | City/State/Zip | 22 F |
| liability company registered agent statutes relating | o at the place designated i and agree to act in this ca to the proper and complet | nd to accept service of process for the above s in this certificate, I hereby accept the appoint apacity. I further agree to comply with the pr te performance of my duties, and I am familia gistered agent as provided for in Chapter 60. | men r ับ rovistoris of all ar with and |
| siames. | (Si | gnature) | |

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 "JEFF 1, 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 EIGHTH DAY OF AUGUST, A.D. 2014.

14 SEP 22 PM 3: 35
SECREMARY OF SIMILE ARIOA

5550260 8300

DATE: 08-08-14

141050584
You may verify this certificate online at corp. delaware.gov/authver.shtml