M1400008119

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cil	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	····
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
\wi4-676	o4O	

Office Use Only



100264881701

SEORITATIO STATE

DEPARTMENT OF STATE

NOV 10 2014 S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2014

CSC

SUBJECT: WG LAKE WALES FL LANDLORD, LLC

Ref. Number: W14000067640

We have received your document for WG LAKE WALES FL LANDLORD, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return 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.

Shelia H Young Regulatory Specialist II

Letter Number: 914A00023857





	ACCOUNT NO.	:	120000000	195			
	REFERENCE	:	367047	4305966			
	AUTHORIZATION	:	Smelle	enan	,		
	COST LIMIT	:	\$ 125.00				- -
ORDER DATE :	November 5, 2014						
ORDER TIME :	10:47 AM						
ORDER NO. :	367047-025						
CUSTOMER NO:	4305966						
NAME:	<u>FOREIGN F</u>			LLC	2502147 E.E.	14 NOV -0 TH	FILED
XXXX QUALIFIC	CATION (TYPE: <u>LI</u>	፲)			75. 52. 33.	· 4: 26	
PLEASE RETURN	THE FOLLOWING AS	PRO	OOF OF FILI	ING:			
XX PLAIN	FIED COPY STAMPED COPY FICATE OF GOOD STA	AN D:	ING				
CONTACT PERSON	N: Courtney Willi	iam	s EXT# 6	2935			
]	EXAMINER: _		•		
]	EXAMINER: _		Ÿ		-

COVER LETTER

	gistration Section vision of Corporation	s								
SUBJECT:	WG Lake Wales FI							<u></u>		
		Name	e of Limi	ited Liability Co	ompa	any				
		reign Limited Liabili ed to register the abo								
Please return	n all correspondence	concerning this matte	er to the	following:						
	Jan R. Ezell, Co	rporate Paralegal								
			Nai	me of Person						
	Alston & Bird I	LP					· · · · · · · · · · · · · · · · · · ·			
			Fir	m/Company						
	1201 West Peac	htree Street						75	14	
				Address					晝	الد
	Atlanta, GA 30							<u> </u>	<u> </u>	
			City/Sta	te and Zip Cod	e				_5 0.	
	Karen.King@Su	nTrust.com E-mail address: (to	he used	for future annu	al res	nort noti	fication)		是	سب
For further in	nformation concernir	g this matter, please		ior ruture amiu-	arie	port non	neation)		27	
Jan	R. Ezeil			_ at ()	881-74	12			
	Name	of Person		Area Cod	le	Daytir	ne Telephon	e Number		
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section Box 6327 lahassee, FL 32314	3] 1	Division Registrat Clifton E	T ADDRESS: of Corporation tion Section Building ecutive Center		le				
Enclosed is	·		Tallahas : Fee &	see, FL 32301 	ling :	Fee &		Filing Fee, Cer is & Certified C		

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.	WG Lake Wales FL Landlord, LLC	-						
	(Name of Foreign Limited Liability Compan	y; must include '	"Limited I	Liability Compa	ny," "L.L.C.,'	or "LLC."	")	
cor	name unavailable, enter alternate name adopted is sent of the managers or managing members adoption in pany," "L.L.C," "LLC.")	or the purpose o	of transacti e name. T	ing business in F he alternate nam	Florida and at ne must include	tach a copy de "Limited	of the w	ritten Y
2	Delaware	5 .	42-15632					
(Jurisdiction under the law of which foreign limite company is organized)	ed liability		(FEI number	, if applicabl	e)		
4.	upon registration							
	(Date first transacted by (See sections 605.0904 &	isiness in Florida 605.0905, F.S.	a, if prior to determ	to registration.) ine penalty liab	ility)			
5.	3333 Peachtree Road, NE, 10th Floor, MC 3951	, Atlanta, GA 3	0326					
		- 	<u> </u>	· · · · · · · · · · · · · · · · · · ·		•		
	(Str	eet Address of I	Principal (Office)		1		
6	3333 Peachtree Road, NE, 10th Floor, MC 3951,	Atlanta, GA 30	326			<u>≥85</u>	÷	
							Ö.	11
		(Mailing A	ddress)				<u></u>	[
7.	The name, title or capacity and address	of the person(s) who l	nas/have auth	ority to mai	nage:is/ar		
	Trust Equity Funding, LLC, Manager	•	. ,		•		45	
33	33 Peachtree Road, NE, 10th Floor, MC 3951, A	tlanta GA 3032	6			الحرز	1	
	3 Telefinee Road, 142, Tolli Tibol, 1916 3331, A	manta, UK 3032						
			~=		·			
in t	Attached is an original certificate of existence, no me jurisdiction under the law of which it is organized slation of the certificate under cath of the translator	d. (A photocopy	is not acc					
		2	·					
		ature of an au		-		•		
	(In accordance with section 605.0203, F. penalties of perjury that the facts stated						a	

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Allison McLeod, Manager of SunTrust Equity Funding, LLC, its Manager

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.

1. The nam	e of the Limited Liability	Company is:	
WG Lake Wa	ales FL Landlord, LLC		
If unavailab	ole, the alternate to be used	in the state of Florida is:	
2. The nam	e and the Florida street ad	dress of the registered agent and office ar	·e:
	Corporation Service Con	рапу	25 T
	****	(Name)	一調真工
	1201 Hays Street		SEE & M
انمد	Florida Sti		
8 P	Tallahassee	FL 32301	080K
,	•	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 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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "WG LAKE WALES FL LANDLORD, 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 SIXTH DAY OF NOVEMBER, A.D. 2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WG LAKE WALES FL LANDLORD, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2014.

TA NOV - PH 4: 03
SECRETARY OF STATE
ANALYSES STORIDA

5628230 8300

141377515

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 1840306

DATE: 11-06-14

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