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| ON SERVICE COMPANY | |
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| ACCOUNT NO. | : 12000000195 |
| REFERENCE | : 399473 7984100 |
| AUTHORIZATION | Souls de man |
| COST LIMIT | : \$ 125.00 |
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| ORDER DATE : December 3, 2014 | |
| ORDER TIME : 3:22 PM | |
| ORDER NO. : 399473-005 | 11 (12) (12) (13) (13) (13) (13) (13) (13) (13) (13 |
| CUSTOMER NO: 7984100 | |
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| NAME: WDFG-STELLAR T | TPA I LLC |
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| XXXX QUALIFICATION (TYPE: LI | 도) |
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| PLEASE RETURN THE FOLLOWING AS | PROOF OF FILING: |
| CERTIFIED COPY | |
| XX PLAIN STAMPED COPY | |
| CERTIFICATE OF GOOD STA | ANDING |
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| CONTACT PERSON: Courtney Willi | iams EXT# 62935 |
| | EXAMINER: |
| | EVALITHEK: |

COVER LETTER

| SUBJECT: | VDFG-Stellar TPA I LLC | | | |
|---------------------|---|--|--------------------------|---------------|
| | Name o | of Limited Liability Company | | |
| | pplication by Foreign Limited Liabili neck are submitted to register the abo | | | |
| Please return all | correspondence concerning this matte | er to the following: | | |
| | | | | |
| | | Name of Person | • | .99 |
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| | E mail addrage: (I | be used for future annual report n | utilization) | |
| | · | · | (Minicarion) | |
| For further infor | nation concerning this matter, please | call: | | |
| | | | | |
| | Name of Contact Person | Area Code | Daytime Telephone Number | _ |
| | | STREET ADDRESS: | | |
| | | Division of Corporations | | |
| Registra P.O. Bo | | Registration Section Clifton Building | | |
| | see, FL 32314 | 2661 Executive Center Circle Tallahassee, FL 32301 | | |
| I aliana | | - · · · · · · · · · · · · · · · · · · · | • | |
| | check for the following amount | | • | |

5

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. WDFG-Stellar TPA I LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," " | I. C " or "I. C.") | | | |
|---|--|--|--|--|
| (Name of Poreign Limited Liability Company; must include Limited Liability Company, | Jankar, GP Eddick J | | | |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The a Liability Company," "L.L.C.," or "LLC.") | Iternate name must include "Limited | | | |
| 2. Delaware 3. N/A | | | | |
| | umber, if applicable) | | | |
| 4. N/A | 22 2 | | | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | ************************************** | | | |
| 5. 4100 George J. Bean Parkyway, Suite 3171 | | | | |
| Tampa, FL 33607 | | | | |
| (Street Address of Principal Office) | | | | |
| 6. 6905 Rockledge Drive, 6th Floor | <u> </u> | | | |
| Bethesda, Maryland 20817 (Mailing Address) | | | | |
| The name, title or capacity and address of the person(s) who has/have author WDFG North America LLC Managing Member - 6905 Rockledge Drive, 6th Floor, Bethesda MD 20817 Stellar Partners, Inc. Operations Member - 5402 Beaumont Center Boulevard, Suite 108, Tampa, F. Transglobal Concessions, LLC | | | | |
| Member - 1007 Golden Oak Court, Orlando, FL 32806 | | | | |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly having custody of records in the jurisdiction under the law of which it is organize acceptable. If the certificate is in a foreign language, a translation of the certificate 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 penaltical an aware that any false information submitted in a document to the Department of State constitutes a third degree felonger. | ed. (A photocopy is not the under oath of the translator | | | |
| Thomas Z. Cheplo | | | | |
| 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.

| WDFG-Stellar TPA I LLC If unavailable, the alternate to be used in the state of Florida is: 2. The name and the Florida street address of the registered agent and office are: Corporation Service Company | - 40 H DE C |
|--|-------------|
| 2. The name and the Florida street address of the registered agent and office are: | |
| | |
| Corporation Service Company | ₩ ₩ |
| | 03 |
| (Name) | |
| 1201 Hays Street | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| Tallahassee 32301 FL | |
| City/State/Zip | |
| Having been named as registered agent and to accept service of process for the above stated limit 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 statutes relating to the proper and complete performance of my duties, and I am familiar with ana accept the obligations of my position as registered agent as provided for in Chapter 605, Florida | all |
| Statutes. Courtney William | S |
| Corporation Service Company Asst. Vice President | nt |
| By: (Signature) | |
| (- B) | |
| \$ 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 "WDFG-STELLAR TPA I 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 THIRD DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WDFG-STELLAR

TPA I LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF NOVEMBER, A.D.

2014.

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

5645512 8300

141481329

AUTHENTICATION: 1917683

DATE: 12-03-14

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