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Foreign Limited Liability Company WPD Tallahassee GP, LLC

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COVER LETTER

	legistration Section Division of Corporations		
SUBJECT	r: WPD Tallaliassee GP, LLC		
		of Limited Liability Company	
			n to Transact Business in Florida," Certificate of liability company to transact business in Florida
Please retu	arn all correspondence concerning this ma	tter to the following:	
	Jarrett R. Woods		
		Name of Person	
	WPD Tallahassee GP, LLC		
		Firm/Company	
	2010 VALLEY VIEW LN STE I	30	
		Address	
	DALLAS, TX 75234		
		City State and Zip Code	
	jarrett@waypointdevelopment.com		
	E-mail address	(to be used for future annual repo	ort notification)
For further	er information concerning this matter, plea	se call:	•
	Jarrett R. Woods	at (972)	896.8025
-	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 Circ Tallahassee, FL 32301	:le
	d is a check for the following amount of the state of the	ng Foe & 🔻 🗖 \$155.00 Filing	

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:

f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nar jability Company," "L.L.C," or "LLC.")	ne must include "L	imited
Texas 3, 47-3281706		
(Jurisdiction under the law of which foreign limited liability (FE) number, if applicate company is organized)	ole)	_
	 4	2
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	NLL/ NECF	_ H 510
2010 Valley View Lane, STE 130	AET.	2
Dallas, TX 75234	ARY ASSI	3
(Street Address of Principal Office)	щG	
2010 Valley View Lane, STE 130	ر بال	
	R≯	•••
Dallas, TX 75234 (Mailing Address)	ion!	
		_
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arien R. Woods, 5012 McMore and Manager 2010 Valley View Lane, 512 150 Danies, 176 15554	· · · · · · · · · · · · · · · · · · ·	_
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Attached is an original certificate of existence, no more than 90 days old, duly authorized custody of records in the jurisdiction under the law of which it is organized. (A pacceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted) Signature of an authorized person In accordance with section 50,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury an aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided to perform the penalties of perjury and performance of the penalties of perjury and performance of the penalties of perjury and performance of the penalties of perjury and penalties of pe	hotocopy is no oath of the tra	ol Anslato Aerein are

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	he Limited Liability Compar	ny is:	
WPD Tallahassee G	P, LLC		
If unavailable, the	e alternate to be used in the s	state of Florida is:	
2. The name and	the Florida street address of	f the registered agent and office are:	
9	C T Corporation System		
		(Name)	_
-	1200 South Pine Island Road		<u> </u>
	Florida Street Addr	ess (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	_
		City/State/Zip	
liability company registered agent of statutes relating t	at the place designated in th and agree to act in this capac to the proper and complete p	o accept service of process for the abovistic certificate, I hereby accept the appoint of the comply with the efformance of my duties, and I am familiered agent as provided for in Chapter (intment as provisions of all iliar with and
В	C T Corporation System y:	Nicole Charinonal	20.
	(Signal	ture)	2015 MAR SECRETA
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	IR -3 PM 1:18 TARY OF STAIL ASSEE, FLORID;

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Coby Shorter, III Deputy Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for WPD Tallahassee GP, LLC (file number 802165034), a Domestic Limited Liability Company (LLC), was filed in this office on February 26, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 03, 2015.



Coby Shorter, III Deputy Secretary of State

Fax: (512) 463-5709 TID: 10264