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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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JUL 28 2015 O BRUCE

COVER LETTER

SUBJECT:	Wahoo 3		ASES LLC ed Liability Company			
		42.14 O. ISHIII.	ve emoning company			
The enclosed "Applica Existence, and check a	ation by Foreign Limited Lare submitted to register the	iability Com above refer	pany for Authorization to renced foreign limited liabi	Fransact Busines lity company to	ss in Florida," transact busine	Certificate of ess in Florida.
Please return all corres	spondence concerning this	matter to the	e following:			
	Willian	a whi	lame of Person			
	Wahoo		Ciates LLC irm/Company			
	115 Ri	dney (Ove Address		-1	Ą
	Lewes Quintessaspo E-mail addin	City/S	- 19958 State and Zip Code MAR UNA D. COM In for July 12 July	1	2015 JUL 27 P Z: SECRETARY OF STATALLAHASSEE, FLOR	
For further information	n concerning this matter, p	lease call:	· ·		58 10A	,
	Name of Contact Persor	ite.	at (302) E	042 - 1e50 Daytime Telephon	e Ane Number	
MAILING A Division of O Registration S P.O. Box 632 Tallahassee,	Corporations Section 27	Division Registr Clifton 2661 E	ET ADDRESS: on of Corporations ration Section Building executive Center Circle assee, FL 32301			
Enclosed is a chec ☐ \$125.00 F	k for the following am Filing Fee	iling Fee &	□ \$155.00 Filing Fee &		Filing Fee, Ce s & Certified (

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: (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.") (Jurisdiction under the law of which foreign limited liability (Date first transacted business in Florida, if prior to registration.) See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Street Address of Principal Office) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to than age Ū Owner S ney are elves- De- 19058 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official 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

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 Limited Liability Company is:		
Wando ? associares 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 Reference White (Name) 2701 Yellowfail ave Florida Street Address (P.O. Box NOT ACCEPTABLE) Marathon FL 33050 City/State/Zip	2015 JUL 27 P 12: 58 SECRETARY OF STATE ETALLAHASSEE. FLORIDA	

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.

(Signature)

\$ 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 "WAHOO & ASSOCIATES LLC" IS DULY

REGISTERED 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 EIGHTEENTH DAY OF MAY, A.D. 2015.

4904522 8300

150645690

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 2386348\)

DATE: 05-18-15

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