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## Foreign Limited Liability Company Walkabout Collaborative LLC

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2/5/2016 3:21:45 PM From: To: 8505176383( 2/3 )

## 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. Walkabout Collaborative 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 in Liability Company," "L.L.C," or "LLC.")  2. DB (Jurisdiction under the law of which foreign limited liability company is organized)  4. February 3, 2016  (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5. 5723 Yeats Manor Drive, Building 2, Unit 401  Tampa, FL 33616  (Street Address of Principal Office)  6. PO Box 20293  Tampa, FL 33622  (Mailing Address)  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		nited
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must in Liability Company," "L.L.C," or "LLC.")  2. DB (Jurisdiction under the law of which foreign limited liability company is organized)  4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5. 5723 Yeats Manor Drive, Building 2, Unit 401  Tampa, FL 33616 (Street Address of Principal Office)  5. PO Box 20293  Tampa, FL 33622 (Mailing Address)  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		 nited
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(Mailing Address)  Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)		
Nume and street address of Florida registered agent: (P.O. Box NOT acceptable)		
C.T. Composition Suntain		
C T Corporation System	<del></del>	
Name: C1 Corporation System	37.6	,
Office Address: 1200 South Pine Island Road	8-8	restore
Plantation , Florida 33324	<b>-</b>	ţ.
(City) (Zip code)	<b>=</b>	1 1
legistered agent's acceptance:	=	1
laving been named as registered agent and to accept service of process for the above stated limited liability comp esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit o complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I a	city. <b>F</b> furti	ier agre
ccept the obligations of my position as registered agent. C T Corporation System		
By: Dunger Dicim		
(Registered agent's signature)		
Ann J. Williams, Assistant Vice President  The name, title or capacity and address of the person(s) who has/have authority to manage is/are:		
Bradley Richarson, Manager, 9308 Ryther Road, Angola, NY 14006		
. Blueday Klonarson , Manager, 2000 Kyther Koad, Migora, 141 14000		
	<del></del>	
Antoinette Forth, Manager, 9308 Ryther Road, Angola, NY 14006		

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## Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WALKABOUT COLLABORATIVE 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 FOURTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5954298 8300 SR# 20160596544

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

Authentication: 201780739

Date: 02-04-16