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SECRETARY OF STATE
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## **COVER LETTER**

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	tration Section on of Corporatio	ons						
SUBJECT:	WII	JES. LLC.						
_			Limited Liability	Company				
The enclosed " Existence, and	Application by Fo check are submitted	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tr ited liabili	ransact Business in Flor ty company to transact l	ida," ( busine	Certif ss in	icate of Florida
Please return al	Il correspondence	concerning this matter to the	following:					
	ROB	ERT M. GALLOWAY, E	5Q.					
		N	ame of Person					
	GALLOWAY, WETTERMARK, EVEREST & RUTENS, LLP.				SEC	ಕ		
	•	F	irm/Company		H		HAR	<u> </u>
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			Address			1./	7	U
	Mobile, A	1 36616			0		9: 42	
		City/S	tate and Zip Code	!	•انعر		. •	
	bgalloway	@gallowayllp.com						
	;	E-mail address: (to be use	d for future annual	report no	tification)			
For further info	rmation concernin	ng this matter, please call:						
Ro	bert M. Gal	loway	at ( 251	) 4	76–4493			
	Name o	of Contact Person	Area Code	Day	ytime Telephone Numb	er		
Divisio Regist P.O. B	ing Address: on of Corporations ration Section ox 6327 assee, FL 32314			Division Registrat Clifton E 2661 Exc	of Corporations tion Section Building ecutive Center Circle see, FL 32301			
	neck for the follow 5.00 Filing Fec	ving amount:  ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filit Certified Copy	ig Fee &	□ \$160.00 Filing Fed of Status & Certified			te

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	I SECTION 605.0902, FLORIDA STATUTES, 'THE FC OT BUSINESS IN THE STATE OF FLORIDA:	DILLOHING IS SUBMITTED TO REGISTER A I	FOREIGN LIMITED LIABILITY
, WILJES, I			
	Foreign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or	LLC.")
(If name unavailable, en Liability Company," "L.	ter alternate name adopted for the purpose of trans 1.C," or "I.I.C.")	acting business in Florida. The alternate nam	e must include "Limited
2. ALABAMA	a	81-1062639	
(Jurisdiction under the	law of which foreign limited fiability	(FEI number, if applicable)	
company is organize			
4. <u>NOT Y</u>	YET DOING BUSINESS  (Date first transacted business in Flor	rida, if prior to registration.)	_ ≥st <b>5</b>
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F.	S. to determine penalty liability)	
5			
5750 HENDERS	SON LANE EAST, GRAND BAY, AL	36541	
3730 IIIIWIII	(Street Address of Principal		
6	•	·	
0			- 유 - 유 
			图 42
	(Mailing Address)		
7. Name and street ad	dress of Florida registered agent: (P.O. Box	NOT acceptable)	
Mana	InCorp Services, Inc.		
Name:		<del></del>	
Office Addre	ss: 17888 67th Court North		
	Loxahatchee	, Florida 33470	•
	(City)	(Zip code)	
Registered agent's ac	eceptance: is registered agent and to accept service of pi	rocess for the above stated limited liabil.	ity company at the place
designated in this app	lication, I hereby accept the appointment as	registered agent and agree to act in this	capacity. I further agree
to complywith the pro	visions of all statutes relative to the proper a	und complete performance of my duties,	and I am familiar with and
accept the obligations	of in position as registered agent.	1 2 2 2	
<b>/</b> 2≥	Josica S	invito or is not the of	50 7100
}	(Registered ages	it's signature) INOP Service	is, lnc.
8. The name, title or	capacity and address of the person(s) who has	s/have authority to manage is/are:	•
CAMES LEWIS H	ENLERSON, JR., MANAGING MEMBE	ir.	
		36541	
	2. 222 227, 000 207, 20		
9 Attached is a certific	cate of existence, no more than 90 days old, d	taly authenticated by the official baying c	ustody of records in the
	law of which it is organized. (If the certificate		
of the translator must l	be submitted)	~	
	Jamos Jewin	V Denderson	$\mathcal{L}$
	Signature of an aut	horized person	<b>,</b> ,
This document is even	uted in accordance with section 605.0203 (1)	(h). Florida Statutes, I am aware that any	false information
	nt to the Department of State constitutes a thir		

JAMES LEWIS HENDERSON JR.

Typed or printed name of signee

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that WilJes, LLC. was formed in Mobile County, Alabama on September 14, 2015. The Alabama Entity Identification number for this entity is 345-505. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

16 MAR 21 AM 9 42 SECRETARY OF STATE



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

3/1/2016

Date

X 2. Menill

John H. Merrill

**Secretary of State**