# 142E000001M

(Re	equestor's Name)	
(Ac	ldress)	,
(Ac	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



THE HAY -5 A 9 57

05/05/16--01013--040 \*\*125.00

TO ACKHOWLEDGE TO ACKHOWLEDGE THE TOTAL BENEFIT OF DEPARTMENT OF STAN

MAY 0 6 2016

swarren

May 5, 2016

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 70616993 WO

Customer Reference 1: 096919-000000

Customer Reference 2: AEN

Dear Department of State, Florida:

Please obtain the following:

L-W Del Prado, LLC (TN) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

# **COVER LETTER**

•	ion of Corporations	,					
UBJECT:	L-W Del Prado, LLC						
Name of Limited Liability Company							
he enclosed xistence, and	Application by Foreign Limited Liability Comp check are submitted to register the above refere	pany for Authorization to Transced foreign limited liability	ansact Business in Florida," Certificat y company to transact business in Flo				
case return a	all correspondence concerning this matter to the	following:					
	Mary Ward						
	N	ame of Person					
	Bradley Arant Boult Cummings LLP						
	Fi	rm/Company	· · · · · · · · · · · · · · · · · · ·				
	1600 Division Street, Suite 700						
		Address					
	Nashville, TN 37203						
	City/S	tate and Zip Code					
	magocking@vanguardhc.com						
	E-mail address: (to be used	for future annual report not	ification)				
r further infe	ormation concerning this matter, please call:						
Mary	Ward	615 252-35	52				
<del></del>	Name of Contact Person	Area Code Day	vtime Telephone Number				
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations tration Section Box 6327 nassee, FL 32314	Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section duilding ecutive Center Circle see, FL 32301				
	heck for the following amount: 25.00 Filing Fee  \$\square\$ \$\square\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Pee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy				

# 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 RI ISINESS, IN THE STATE OF ELORIDA.

i name unavanane, enter al iability Company," "L.L.C,	ternate name adopted for the purpose	of transacting bus	iness in Florida. The alter	nate name i	nust inch	ide "Limited
Tennessee	·,	3. N/A				
urisdiction under the law of which foreign limited liability company is organized)		J. ————	(FEI number, if applicable)			
				•		
	(Date first transacted busine (See sections 605.0904 & 605.	ss in Florida, if prid	or to registration.)			
Six Cadillac Drive, Su			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Brentwood, TN 37027			<u> </u>	,	514	
Dieniwood, 114 3/02/	(Street Address of P	rincipal Office)		• • •	מינו	
Six Cadillac Drive, Sui	•	. ,		-12 12 12	~	Market B
Brentwood, TN 3702	7			350	3 133	i i
210111110003, 1.11 0.102	(Mailing A	Address)			$\triangleright$	m
Name and street address	g of Florida registered agent: (P.	O. Box NOT acc	entable)	FLC	<u>م</u> ۔	O
Name;	C T Corporation System	J. 200 A. 200 A. C.	optacio,	FLORID	<u>ن</u> اب	
	1200 South Pine Island Road		•	7	المجند.	
Office Address:		·				
	Plantation (City)		, Florida <u>33324</u> (Zip c			
signated in this application complywith the provision	gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the pay position as registered agent.	ment as registere proper and comp ystem	d agent and agree to a lete performance of m	ct in this o	capacity.	I further
cept the obligations of i	By: CT Corporation Sy (Registe	Nathan S. Giff ered agent's signati	are)			
The name, title or caps	(Register			:		
. The name, title or caps arry Williams, Sole Dire	Register (Register to the person(s) and President			:		
The name, title or caps arry Williams, Sole Dire	Register (Register to the person(s) and President			•		
. The name, title or capa arry Williams, Sole Dire ix Cadillac Drive, Suite	Register (Register to the person(s) and President			:		
. The name, title or caps arry Williams, Sole Dire ix Cadillac Drive, Suite : rentwood, TN 37027 Attached is a certificate	Register (Register (Regist	who has/have au	nticated by the official reign language, a transl	having cu	stody of	records in cate under
The name, title or capa arry Williams, Sole Dire ix Cadillac Drive, Suite rentwood, TN 37027  Attached is a certificate risdiction under the law of the translator must be suited.	Register (Register (Regist	who has/have au  ys old, duly autheritificate is in a fo	nticated by the official reign language, a transf	having cu lation of th	ie certifi	cate under
The name, title or capa arry Williams, Sole Dire ix Cadillac Drive, Suite rentwood, TN 37027  Attached is a certificate risdiction under the law of the translator must be suited to the document is executed as a content of the translator must be suited to the trans	Register (Register (Regist	who has/have au  ys old, duly auther  rtificate is in a form  of an authorized po	nticated by the official reign language, a transl	having cu lation of th	ne certifi alse info	cate under

Typed or printed name of signee



# STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

# **BRADLEY ARANT BOULT CUMMINGS LLP**

May 4, 2016

STE 700

1600 DIVISION ST

NASHVILLE, TN 37203-2771

Receipt #: 002682397

Request Type: Certificate of Existence/Authorization

Issuance Date: 05/04/2016

Copies Requested:

Request #:

0201399

**Document Receipt** 

Filing Fee:

\$20,00

Payment-Check/MO - BRADLEY ARANT BOULT CUMMINGS LLP, Nashville, TN

\$20.00

Regarding:

L-W Del Prado, LLC

Filing Type:

Limited Liability Company - Domestic

Control #:

847132

Formation/Qualification Date: 05/04/2016

Date Formed:

05/04/2016

Status:

Active

Formation Locale: TENNESSEE

**Duration Term:** 

Perpetual

Inactive Date:

**Business County: WILLIAMSON COUNTY** 

### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

# L-W Del Prado, LLC

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Nichole Hambrick

Verification #: 017205721