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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

: (850)205-8842

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address: | | | _ |
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Foreign Limited Liability Company Wal-Mart Stores Texas, LLC

| Certificate of Status | 0 |
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| Page Count | 04 |
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COVER LETTER

| TO: | Registration Section Division of Corporation | ns | | | | | | |
|----------|--|---|-------------------------------------|--|--|-----------------------------------|--|--|
| SUBJE | CT: | Wal-Ma | n Stores Texas, LLC | : | | | | |
| 50 551 | | Name of | Limited Liability Cor | mpany | <u> </u> | | | |
| The en | closed "Application by Fo ce, and check are submitt | reign Limited Liability Comp ed to register the above refere | eany for Authorization | on to Tra Hiability | ansact Rusiness in Florida," y company to transact busin | Certificate of sess in Florida | | |
| Please | return all correspondence | concerning this matter to the | following: | | | | | |
| | | Ċ | Carol Haggard | | | | | |
| | - | N | ame of Person | | | | | |
| | | Wa | l-Mart Stores, Inc. | | | | | |
| | | · Fi | rm/Company | | | | | |
| | | 708 | 3 SW 8th Street | | | | | |
| | Address | | | | | | | |
| | Bentonville, AR 72716-0215 | | | | | | | |
| | | City/S | tate and Zip Code | <u></u> | | 16 HAY 12 F | | |
| | | Caro | l.Haggard@walmart | legal.co | m | 72 | | |
| | | E-mail address: (to be use | d for future annual re | port no | lification) | <u> </u> | | |
| For furt | her information concernit | ng this matter, please call: | | | | 16 HAY 12 PH 10: 01 | | |
| | C | aroi Haggard | 479 | | 277-2206 | | | |
| | Name | of Contact Person | Area Code | Day | rtime Telephone Number | | | |
| | MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | n R C 2 | Division legistrat Difton B 661 Exe | r ADDRESS: of Corporations ion Section building secutive Center Circle sec, FL 32301 | | | |
| Enclose | ed is a check for the follow \$125.00 Filing Fee | ving amount; \$130.00 Filing Fcc & Certificate of Status | ☐ \$155.00 Filing Cartified Copy | Fec & | ☐ \$160.00 Filing Fee, Co of Status & Certified Cop | | | |

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

IN COMPLIANCE WITH SECTION 603,0902, FLORIDA STATUTES, THE HOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BLISINESS IN THE STATE OF FLORIDA: Wal-Mart Stores Texus, LLC (Name of Fereign Limited Liability Company; must include "Limited Liability Company," "L.E.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The afternate name must include "Limited Liability Company," "L.L.C." or "LLC.") 74-3019386 Dalatvate (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted justiness in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 708 SW 8th Street, Bentonville, AR 72716 (Street Address of Principal Office) 708 SW 8th Street, Bentonville, AR 72716 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
CT Cosporation System By: (Registered agent's signature) Katherine Lackey, Asst. Sec. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/orc: Cindy Mochring Sole Manager 702 SW 8th Street Bentonville, AR. 72716 9. Attached is a 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. (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 This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree follow as provided for in s.817.155, F.S. Carol J. Haggard

Typed or printed fishe of signee

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WAL-MART STORES TEXAS, 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 TWELFTH DAY OF MAY, A.D. 2016.

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

SECRETARY OF SIGNEDA TALLAHASSEE, FLOSIEA

4376139 8300 SR# 20163142052 Authentication: 202309580

Date: 05-12-16

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