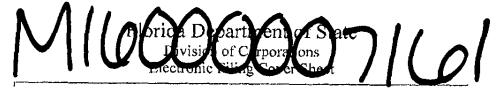
Division of Corporations

Page 1 of 2



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(((H16000217843 3)))



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From:

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Fax Number : (407)839-4264

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Foreign Limited Liability Company Greeneway/WFII, LLC

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COVER LETTER

SUBJECT:	Greeneway/WFII, I	rtc		•
	Name of Limited Liability Company			
The enclosed Existence, ar	l "Application by Fo nd check are submitte	reign Limited Liability Comp ed to register the above refer	oany for Authorization to Tra	ansact Business in Florida," Certificate y company to transact business in Flor
Please return	ni) correspondence	concerning this matter to the	following:	•
	Kristi Dickisos	3		
		И	amo of Person	
	Broad and Cas	sel		
		F	nu/Company	
	390 N. Orange	Avenue, Suite 1400		
			Address	4 14 15 17 17 17 17 17 17 17 17 17 17 17 17 17
	Orlando, Florie	da 3280i		
	**************************************	City/S	tate and Zip Code	
	stevenh@breede	evelopment.com		
		E-mail address: (to be use	d for future annual report no	lification)
For forther in	uformation concernit	ng this matter, please call:		
Kri	isti Dickison		407 481-52	163
	Name	of Contact Person	Area Code Day	ytime Telephone Number
Div Reg P.O	ILING ADDRESS ision of Corporation just atton Section Box 6327 lahassee, FL 32314		Division Registrat Clifton 6 2661 Exc	F ADDRESS: of Corporations tion Section Building contive Center Circle sec, F1, 32301
	a check for the follow \$125.00 Filing Fee	ving amount: \$\Boxed{\Omega} \\$130.00 \\$iling Fee & Certificate of Status	\$155,00 Filing Fee & Certified Copy.	\$160.00 Filing Fee, Certificate of Status & Certified Copy

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September 8, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BROAD AND CASSEL (ORLANDO)

SUBJECT: GREENEWAY/WFII, LLC

REF: W16000060802

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call $(850)\ 245-6051$.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H16000217843 Letter Number: 116A00018992 UI

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

Greeneway/WFILLLC					
(Name of Fore	eign Limited Liability Company; must include	"Limited Clability Company," "L.L.C.," or "L.L.	C.")		
Liability Company," "L.L.C,	itemate name adopted for the purpose of hansa" or "LLC,")	acting business in Florida. The alternate name or	ost include "I	imited	
2. Alabama	4	37-4067014			
company is organized)	of which foreign limited liability	(FEI number, if applicable)			
4. upon filing					
	(Date first transpored business in Flor (See sections 605.0904 & 605.0905, F.S	ian, ii prier to regisimiton.) k to determine penulty liability)			
5. 2101 Highland Avenue	e South, Suite 110		5		
Birmingham, Alabama	192//5		;-	ر دی	
Zumagam, Zadam	(Street Address of Principal	Office)		10.1	
6. 2101 Highland Avenue		,		1	
				در	
Birmingham, Alabama	(Mulling Address)		77	7, yaa 	
	• • •		<u>_</u> , 0.	င်း	
Name and street address	gg of Florida registered agent: (P.O. Box	NOT acceptable)	17	C)	
Name;	NRAI Services, Inc.		التج	ŏ'n	
Office Address:	1200 South Pine Island Road		2.5**		
	Plantation	, Florida 33324 (Zip code)			
Registered agent's accep		(Zip code)			
designated in this applica to complywith the provisi	tion. I hereby accept the appointment as	rocess for the above stated limited liability registered agent and agree to act in this count complete performance of my duties, an Assistant Secretary	ipučliy. I fi	irther as	re
8. The name, title or capa	acity and address of the person(s) who has	thave authority to manage is/are:			
Steven C. Hydinger	Mar				
2101 Highland Avonne S	20 110				
Diemingham, Alabama 3.	\$205				
	of existence, no more than 90 days old, d of which it is organized, (If the certificate ubmitted)	ndy authenticated by the official having cust is in a foreign language, a translation of the			
	Signature of an aut	horized person			
	I in accordance with section 605.0203 (1)	(b), Florida Statutes. I am aware that any fal id degree felony as provided for in s.817.15;		on	

Typed or printed name of signce

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 Greeneway/WFII, LLC was formed in Jefferson County, Alabama on May 21, 2015. The Alabama Entity Identification number for this entity is 336-368. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20160824000017474

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.

8/24/2016

Date

X 24. Marill

John H. Merrill

Secretary of State