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## COVER LETTER

TO: ' Registration Section - Division of Corporations				
WHITNEY VENTURES, LLC SUBJECT:				
Name of Limited Liability Company				
	ny for Authorization to Transact Business in Florida," Certificate of ced foreign limited liability company to transact business in Florida			
Please return all correspondence concerning this matter to the fo	llowing:			
J. BRADFORD HINES, ESQ.				
Nan	ne of Person			
J. BRADFORD HINES, P. A.				
Firm	n/Company			
116 6TH ST S				
	Address			
ST. PETERSBURG, FL 33701				
City/Stat	te and Zip Code			
CHRIS@SCHERERDEVELOPMENT.COM				
E-mail address: (to be used t	for future annual report notification)			
For further information concerning this matter, please call:				
JOHN C. SCHERER	727 535-5151 at ()			
Name of Contact Person	at () Area Code Daytime Telephone Number			
MAH.ING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy			

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

IN COMPILANCE 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:

(If name unavailable, enter a Liability Company,""L.L.C.		sacting business in Florida. The alternate name r	nust include "Limited
2. DELAWARE	3.		
company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. UPON REGISTRATIO			
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	orida, if prior to registration.) S. to determine penalty liability)	
5. 116 6TH ST S			
ST. PETERSBURG, F	L 33701		( · ·
<del> </del>	(Street Address of Principal	Office)	
6. 116 6TH ST S			
ST. PETERSBURG, F	L 33701		7 JAH -5
	(Mailing Address)		*** 9*
7. Name and street address	ss of Florida registered agent; (P.O. Box	NOT acceptable)	-12
Name:	J. BRADFORD HINES		#: 32
Office Address:	116 6TH ST S		
	ST. PETERSBURG	, Florida 33701 (Zip code)	
	(City)	(Zip code)	
designated in this applica to complywith the provisi	tion, I hereby accept the appointment a	process for the above stated limited liability s registered agent and agree to act in this c and complete performance of my duties, a	capacity. I further agree
	(Registered age	nt's signature)	
9. The name title or con-	acity and address of the person(s) who ha	ac/have authority to manage ic/are:	
•	•	VENUE, STE. 209, CLEARWATER, FL 3	3762
JOHN C. SCHERER, AO	THORIZED WEWISER, 4500 140111 A	VENOU, STE. 20%, CEERWATER, TE S	
	of which it is organized. (If the certificat ubmitted)	duly authenticated by the official having cus e is in a foreign language, a translation of th	
	Signature of an ac	uborized nerson	
	Signature of all at	miorized person	
This donument is avacutar	Lin accordance with section 605,0203 (1)	) (b), Florida Statutes. I am aware that any fa	dse information

Typed or printed name of signee

J. BRADFORD HINES

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "WHITNEY VENTURES, 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 JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WHITNEY VENTURES, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF OCTOBER, A.D. 2016.

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

Authentication: 201811136

Date: 01-04-17

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