

W1170000002701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

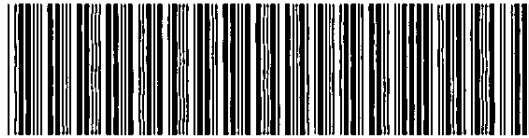
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000297065870

FILED

2017 MAR 29 A 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2017 MAR 29 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
MAR 30 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 573133 4320702

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : March 28, 2017

ORDER TIME : 1:10 PM

ORDER NO. : 573133-010

CUSTOMER NO: 4320702

FOREIGN FILINGS

NAME: DUNN WMA, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

FILED
2017 MAR 29 A 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DUNN-WMA, L.P.
309 SE Osceola Street
Suite 350
Stuart, Florida 34994

Florida Department of State
Tallahassee, Florida

Re: *Consent to Use of Name by DUNN-WMA, L.P.*

Dear Sir or Madam:

DUNN-WMA, L.P., a Delaware limited partnership hereby consents to the use of the name DUNN WMA, LLC, a related entity, upon the filing in the State of Florida of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.

IN WITNESS WHEREOF, DUNN-WMA, L.P. has caused this consent to be executed on this 28th day of March, 2017.

DUNN-WMA, L.P.

By: DUNN Capital Management, LLC,
its General Partner

By: D.A.K.
Name: David A. Kauppi
Title: Authorized Person

2017 MAR 29 A 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DUNN WMA, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Martin H. Bergin

Name of Person

DUNN Capital Management, LLC

Firm/Company

DUNN Building, 309 SE Osceola Street, Suite 350

Address

Stuart, Florida 34994

City/State and Zip Code

marty@dunncapital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David A. Kauppi

at (772)

286-4777 ext. 274

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING 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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 MAR 29 A 10:02

FILED

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 BUSINESS IN THE STATE OF FLORIDA:

1. DUNN WMA, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. DUNN Building, 309 SE Osceola Street, Suite 350
Stuart, Florida 34994
(Street Address of Principal Office)

6. DUNN Building, 309 SE Osceola Street, Suite 350
Stuart, Florida 34994
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: David A. Kauppi
Office Address: DUNN Building, 309 SE Osceola Street, Suite 350
Stuart, Florida 34994
(City) (Zip code)

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 comply with 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.

David A. Kauppi
By: D.A.K.
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

DUNN Capital Management, LLC, Manager, 309 SE Osceola Street, Suite 350, Stuart, Florida 34994

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)

D.A.K.
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 felony as provided for in s.817.155, F.S.

David A. Kauppi
Typed or printed name of signer

FILED
2017 MAR 29 A 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DUNN WMA, 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 TWENTY-EIGHTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DUNN WMA, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2017.

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



6362365 8300

SR# 20172081247

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202281681

Date: 03-28-17