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Account Number : ECAPORATION SYSTEM

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Fax Number

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## Foreign Limited Liability Company RELP MOJO, LLC

| Certificate of Status | 0        |
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## COVER LETTER

|   | gistration Section<br>vision of Corporation    | 18  |   |   |   |                               |     |
|---|--|---|---|---|---|-------------------------------|-----|
| SUBJECT:  | RELP MOJO, LLC                                 |   |   |   |   | •                             |     |
| Name of Limited Liability Company   |  |   |   |   |   |                               |     |
| The enclosed<br>Existence, a  | d "Application by For<br>nd check are submitte | eign Limited Liability Comp<br>d to register the above refere | any for Authoriza<br>need foreign limit         | tion to Tra<br>ed liability   | nsact Business in Florida,"<br>company to transact busine | Certificate of ess in Florida |     |
| Please return   | n all correspondence o                         | concerning this matter to the                                 | following:                                      |   |   |                               |     |
|   | PEGGY SIEFR                                    |   |   |   |   |                               |     |
|   | Name of Person                                 |   |   |   |   |                               |     |
|   | USAA REAL I                                    | ESTATE COMPANY  |   |   |   |                               |     |
|   | Firm/Company                                   |   |   |   |   |                               |     |
|   | 9830 COLONNADE BLVD., SUITE 600                |   |   |   |   |                               |     |
|   | Address  |   |   |   |   |                               |     |
|   | SAN ANTONIO, TX 78230-2239                     |   |   |   |   |                               |     |
|   | City/State and Zip Code                        |   |   |   |   |                               | , · |
|   | peggy.siefken@                                 |   |   |   |   | 哥哥                            | ļ   |
|   |  | E-mail address: (to be used                                   | for future annual                               | report not  | ification)  | <b>5</b> SST                  | 7 T |
| For further i   | nformation concernin                           | g this matter, please call:                                   |   |   |   | 3 7                           | ₽C  |
| PEGGY SIEFKEN   |  | 210<br>at (   | 641-84  | 64  | AFR 13 AM 9: 23   |                               |     |
|   | Name o   | f Contact Person  | Area Code                                       | Day   | time Telephone Number                                     | 23                            | 114 |
| MAILING ADDRESS: Division of Corporations Registration Section P.O Box 6327 Tallahassee, FL 32314 |  |   | Division<br>Registrati<br>Clifton B<br>2661 Exe | ADDRESS: on Corporations on Section uilding cutive Center Circle ee, FL 32301 |   |                               |     |
|   | a check for the follow<br>\$125.00 Filing Fee  | ing amount; ☐ \$130.00 Filing Fee & Certificate of Status     | □ \$155 00 Filin<br>Certified Copy              |   | ☐ \$160.00 Filing Fee. Ce<br>of Status & Certified Cop    |                               |     |

## 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

| RELP MOJO, LLC   | SINESS IN THE STATE OF FLOR   |  |  |                        |
|--|---|--|--|------------------------|
| (Næme of Fore  | ign Limited Liability Company;  | must include "Limited Liability                            | Company," "L.L.C.," or "LLC                                  | ·')                    |
| Liability Company," "L.L.C."   | ternate name adopted for the pur  | pose of transacting business in                            | Florida. The alternate name mus                              | include "Limited       |
| 2. DELAWARE  |   | 3.   |  |                        |
| (Jurisdiction under the law<br>company is organized)   | of which foreign limited liability  | (I   | El number, if applicable)                                    | <del></del>            |
| 4  | (Date first transacted but<br>(See sections 605,0904 & 6  | siness in Florida, if prior to regi                        | stration.)   |                        |
| 5. 9830 COLONNADE E  | REVIDENTE OU  | aus, 090s, F.S. to determine per                           |  |                        |
| SAN ANTONIO, TX 7  | 78230-2239  |  |  |                        |
|  |   | of Principal Office)                                       |  | 320                    |
| 6. 9830 COLONNADE B  | LVD., SUITE 600   |  |  | コド                     |
| SAN ANTONIO, TX  | 78230-2239  |  |  | 17 APR 13 AM 9: 23     |
|  | (Maili  | ng Address)  |  | (J)                    |
| 7. Name and street address   | s of Florida registered agent:  | (P.O. Box NOT acceptable                                   | •)   | 7                      |
| Name:  | C T Corporation System  |  |  | ڥَ .                   |
| Office Address:  | 1200 South Pine Island Roa  |  |  | 73                     |
|  | Plantation  | , F  | lorida   |                        |
|  |   | )  | (Zip code)   |                        |
| designated in this applica-<br>to complywith the provision<br>accept the obligations of t  | gistered agent and to accept<br>tion, I hereby accept the appo<br>ons of all statutes relative to t<br>ny position as registered age. | ointment as registered agen<br>the proper and complete pet | t and agree to act in this cap<br>formance of my duties, and | acity. I further agree |
|  | <u>y</u> .  | gistered agent's signature)                                | ,                      |                        |
| a The years title come   | icity and address of the persor   | nter who hardway authorize                                 | o mongaa islaya  |                        |
|  | ORS, LLC, 9830 COLONNA  |  |  | 20 sala manhar         |
| USAA EQUITY ADVISO   | ORS, CI.C. 9830 COLONNA   | TOE BEVD., SCITE 000, SA                                   | IN ANTONIO, 1A 70234-22                                      | .59, sole member       |
| Topic and the same of the same |   |  |  | <del> </del>           |
| 0. Attached is a certificate   | of existence, no more than 90   | days old duly authenticates                                | the the official basing custon                               | dy of records in the   |
|  | of which it is organized. (If th  |  |  |                        |
|  | Signat  | ture of an authorized person                               | 40° 44° 44° 44° 44° 44° 44° 44° 44° 44°                      |                        |
|  | in accordance with section 60 the Department of State cons  | 05.0203 (1) (b), Florida Stati                             |  |                        |
|  | James K. Hardin (see attact   |  | •  |                        |
|  | Typed   | or printed name of signee                                  |  |                        |

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RELP MOJO, 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 APRIL, A.D. 2017.

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

6375569 8300 SR# 20172455804

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

Authentication: 202364791

Date: 04-12-17