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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

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SECRETARY OF SALLAHASSEE, FLORIDARY

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## Foreign Limited Liability Company Accelerated Investments WPB, LLC

Certificate of Status		1
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FARTASSEE, FLORIDA

D. SCOTT

JUL 6 2017

7/5/17, 1:39 Pt

lan Weiner

## APPLIC ATION BY F DREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SEATION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY: O TRANSACT B ISINESS IN THE STATE OF FLORIDA: Accelerated Investments WPB, LLC Name of Forcige Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") [If some unavai side, enter elsenate ame adopted for the purpose of transacting husiness in Florids. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Delaware: 3, 82-1797326 (Juntaclicits in under the law of to such foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florids, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty limbility) 6. 7900 Glades Road 7900 Gindes Road (Street Address of Initional Office) (Mailing Address) Suite 601 Suite 600 Boca Raton, FL 33434 Boca Raton, FL 33434 7. Name still street addres & of Florida registered agent: (P.O. Box NOT acceptable) Ian Weiner Name: 7900 Glades Road, Suite 600 Office Address: Boca Raton Plorida 33434 Registered agent's acceptance: -31 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 obligation, of my position as registered agent. Ian Weiner (Registered agent's vignuture) 8. The name, title or capt city and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Author, red Person Ian Weiner 7900 Glades Road, Stc. 600 Boca Raton, FL 33434 (Use attachments if necessary) 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) 늘 10. 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. 📆 🧺 Signature of an authorized person

Typed or printed name of signes

## Delaware The First State

Page 1

I, JITFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ACCELERATED INVESTMENTS WPB, 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 SEOW, AS OF THE EIGHTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACCELERATED "INVESTMENTS WPB, LLC" WAS FORMED ON THE EIGHTH DAY OF JUNE, A.D. 2017.

AND 1 DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

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SR#: 20174549188

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



Authentication: 202674689

Date: 06-08-17