(Re	questor's Name)			
(Ad	dress)	<u> </u>		
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(Cit	y/State/Zip/Phone	÷#)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to I	Filing Officer:			





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J. HARRIS

## $\frac{SUNSHINE}{}$ corporate filing of florida inc.

## 3458 Lakeshore Drive

Tallahassee, Florida 32312

(850) 656-4724

DATE:	7/17 Toll Free: 844-541-679:	WALK IN
ENTITY NA	ME: Waterleaf TICG LLC	
DOCUMENT	# Carol (698)	
	**PLEASE FILE THE ATTACHED AT	ND RETURN: **
	Plain Copy Certified Copy	
	**PLEASE OBTAIN THE FOLLOWING FOR THE	E ABOVE ENTITY:**
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	**APOSTILLE'/NOTARIAL CERTI	FICATION: **
COUNTRY C	F DESTINATION	
NUMBER OF	CERTIFICATES REQUESTED	
TOTAL \$ C		

Please call Tina at the above number for any issues or concerns. Thank you so much!

#### COVER LETTER

SUBJECT:	Waterleaf TIC 6, I	LC				
SUBJECT		Name o	f Limited Liability	Company	·	-
The enclose Existence, a	ed "Application by Fo and check are submitt	oreign Limited Liability Con ted to register the above refe	npany for Authorizationed foreign limit	ation to T ited liabili	ransact Business in Florida, ity company to transact busi	" Certificate of iness in Florida
Please retur	n all correspondence	concerning this matter to the	e following:			
	Annie Zettel					
		1	Name of Person		· · · · · · · · · · · · · · · · · · ·	-
	Steckbauer W	einhart, LLP				
	Firm/Company					-
	333 South Ho	pe, 36th Floor				
Address						_
	Los Angoles, (	CA 90071				
		City/f	State and Zip Code			-
	azettel@swesq.o	pom pom				
		E-mail address: (to be use	d for fliture annua	report no	ntification)	•
For further i	nformation concernin	ng this matter, please call:				
An	mic Zettel		213 at (	687-7	543	
	Name o	of Contact Person	Area Code	Da	ytime Telephone Number	•
Div Reg P.O	NLING ADDRESS: Islon of Corporations gistration Section b. Box 6327 Iahassee, PL 32314	ì		Division Registra Clifton I 2661 Ex	T ADDRESS: a of Corporations tion Section Building ecutive Center Circle see, FL 32301	
	n check for the follow \$125.00 Pilling Fee	ving amount: □ \$130.00 Filing Foe & Certificate of Status	\$155.00 Pilin Certified Copy	ng Fee &	\$160.00 Filing Fee, C of Status & Certified Co	Certificate py



### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 10, 2017

SUNSHINE CORPORATE FILING

SUBJECT: WATERLEAF TIC 6, LLC

Ref. Number: W17000056382

they are registered they pagest to put Inc. at the end of the name

Please refile + gue o

We have received your document for WATERLEAF TIC 6, LLC and your check(s) totaling \$1568.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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

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

Jenna D Harris Regulatory Specialist II

Letter Number: 817A000138205

DRIM WEST VALUE OF THE SERVICE OF TH

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

(Name of For	olgn Limited Liability Company; n	nust include "Limited Liability Company," "L.L.C.," or "LL	.C.")
name unavailable, enter a ability Company," "L.L.C.		ose of transacting business in Florida. The alternate name m	nust include "Limited
Dolaware	·	2	
Jurisdiction under the law company is organized)	of which foreign limited liability	(PRI number, if applicable)	<del></del>
immediately			
	(Date first transacted business) (See sections 605.0904 & 60	ness in Fiorida, if prior to registration.) 15.0905, F.S. to determine penalty liability)	
c/o Investors Managen	nent Group, Inc., 22144 Clarence		
Woodland Hills, CA 9	1367		<u></u> 1 No
	(Street Address of		ALL SE
c/o Investors Managem	ent Group, Inc., 22144 Clarence	ion Street, Suite 303	둘러 들
Woodland Hills, CA 9	1367		SLURETARY ALLAHASS
	(Malling	Address)	22.0
Name and street addres	s of Florida registered agent: (I	P.O. Box NOT acceptable)	<b>79 R</b>
Name:	Unisearch, Inc.	***************************************	87.8 80.1 80.1 80.1
Office Address:	155 Office Plaza Drive		DA DEC
	Tallahassee	, Florida 3:2301	
gistered agent's accept	(City)	(Zlp code)	
ignated in this applicat complywith the provisio	ion, I hereby accept the appoin	Carol Berg, Asst. Secretary	pacity. I further agree
1		tered agent's signature)	
The name, title or capa-	city and address of the person(s)	who has/have authority to manage is/are:	
The name, title or capa arc Gordon, E.V.P. of M	city and address of the person(s)	) who has/have authority to manage is/are:	
The name, title or capa arc Gordon, E.V.P. of M	city and address of the person(s) anager  Group, Inc., 22144 Clarendon 5	) who has/have authority to manage is/are:	

Typed or printed name of signee

Marc Gordon

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "WATERLEAF TIC 6, 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-SEVENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WATERLEAF TIC 6, LLC" WAS FORMED ON THE TWELFTH DAY OF JUNE, A.D. 2017.

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

at corp.delaware.gov/auth

Authentication: 202790284

Date: 06-27-17

6442216 8300 SR# 20174977209