

M17000008329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

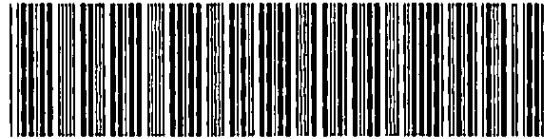
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

PA. sign  
W7-74056

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17 SEP 27 AM 10:47  
DIVISION OF REVENUE

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SEP 29 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 14, 2017

GENEICE WARGA  
TWO PERSHING SQUARE  
2300 MAIN ST, STE 80  
KANSAS CITY, MO 64108

SUBJECT: WATERLOGIC EAST, LLC  
Ref. Number: W17000074056

We have received your document for WATERLOGIC EAST, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 017A00018770

2017 SEP 27 AM 11:06

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 11/14/2017 BY 60322

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Waterlogic East, 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:

Geneice Warga

\_\_\_\_\_  
Name of Person

Kutak Rock LLP

\_\_\_\_\_  
Firm/Company

Two Pershing Square, 2300 Main Street, Suite 800

\_\_\_\_\_  
Address

Kansas City, MO 64108

\_\_\_\_\_  
City/State and Zip Code

NATHAN.HURST@WATERLOGICUSA.COM

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

For further information concerning this matter, please call:

Geneice Warga

816

960-0090

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

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. WATERLOGIC EAST, 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. 20-4230241  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)
4. 08/01/2017  
(Date first transacted business in Florida, if prior to registration.  
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability))
5. 77 MCCULLOUGH DR., STE 9 6. 77 MCCULLOUGH DR., STE 9  
(Street Address of Principal Office) (Mailing Address)  
NEW CASTLE, DE 19720 NEW CASTLE, DE 19720

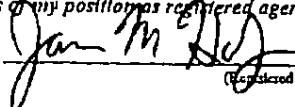
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD  
PLANTATION, Florida 33324  
(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.

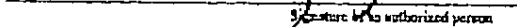
 **James M. Halpin**  
(Registered agent's signature) Assistant Secretary

8. The name, title or capacity 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:                                                                 |
|--------------------|-----------------------------------------------------------------------------------|--------------------|-----------------------------------------------------------------------------------|
| <u>MANAGER</u>     | <u>NATHAN HURST</u><br><u>77 MCCULLOUGH DR. #9</u><br><u>NEW CASTLE, DE 19720</u> | <u>MANAGER</u>     | <u>SIMON BOLTON</u><br><u>77 MCCULLOUGH DR. #9</u><br><u>NEW CASTLE, DE 19720</u> |
| <u>MANAGER</u>     | <u>CASEY TAYLOR</u><br><u>77 MCCULLOUGH DR. #9</u><br><u>NEW CASTLE, DE 19720</u> | <u>MANAGER</u>     | <u>ROBERT JUNK</u><br><u>77 MCCULLOUGH DR. #9</u><br><u>NEW CASTLE, DE 19720</u>  |

(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)

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 authorized person  
Casey Taylor  
Typed or printed name of signer

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17 SEP 27 AM 10:40  
DIVISION OF

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WATERLOGIC EAST, 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 FIRST DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WATERLOGIC EAST, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JANUARY, A.D. 2006.

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

  
\_\_\_\_\_  
Jeffrey W. Bullock, Secretary of State

4096127 8300

SR# 20175999648

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203159680

Date: 09-01-17