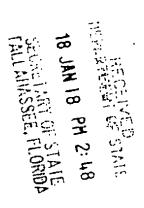
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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 030721 7528092				
AUTHORIZATION: Spelle React				
COST LIMIT : \$ 125.00				
ORDER DATE : January 18, 2018				
ORDER TIME : 12:12 PM				
ORDER NO. : 030721-005				
CUSTOMER NO: 7528092				
FOREIGN FILINGS				
NAME: WPIP PLANTATION PROPERTY, LLC				
XXXX QUALIFICATION (TYPE: LL)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

COVER LETTER

TO:

ro:		ntion Section For Corporation	ĸ			
SUBJEC		PIP Plantation Pro				
3() (3 () (2)	· ·		Name of L	imited Liability Co	mpany	
The encl Existence	losed "A cc, and cl	pplication by Fore neck are submitted	eign Limited Liability Compa I to register the above referer	iny for Authorizationsed foreign limited	on to Tran I liability	isact Business in Florida," Certificate o company to transact business in Florida
Please r	eturn all	correspondence c	oncerning this matter to the f	ollowing:		
		Marian Curtis				
			Na	me of Person		
		Westport Capita	al Partners LLC			
			Fir	m/Company		
		40 Danbury Ro	ad			
				Address		
		Wilton, CT 068	340			
			City/St	ate and Zip Code		
		mcurtis@westpo	<u>-</u>			
			E-mail address: (to be used	for future annual	report noti	ification)
For fur	ther infor	mation concernin	g this matter, please call:			
	Mariar	n Curtis		203 at (429-860)I
		Name o	of Contact Person	Area Code	Day	time Telephone Number
	Divisio Registr P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 assec, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding secutive Center Circle see, FL 32301
Enclose		neck for the follow 5.00 Filing Fee	ving amount: \$130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	g Fee &	☐ \$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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate	name adopted for the purpose of transacting business in l	Forida, The alternate name must include "Limit	ted Liability Company," "L L.C," or "LLC.")
Delaware		3. 82-3966318	
(Jurisdiction under the law of	which foreign lurated liability company is organized)	(FI	! number, if applicable)
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to deter	to registration.) mane penalty liability)	
WPIP Plantation Prop	perty, LLC	6. WPIP Plantation Prop	erty, LLC
(Street Address of	Principal Office)	(Mailin	ig Address)
40 Danbury Road		40 Danbury Road	
Wilton, CT 06897		Wilton, CT 06897	ng Address)
Name and street addre	ess of Florida registered agent; (P.O. Bo	ox NOT acceptable)	
Name:	Corporation Service Company		· *
Office Address:	1201 Hays Street		
	Tallahassee		
egistered agent's acce	(City)		ip code)
comply with the provis	ation, I hereby accept the appointment sions of all statutes relative to the propers of my position as registered agent. Corporation Service Company By: (Registered agent)	as registered agent and agree to er and complete performance of	nited liability company at the place of act in this capacity. I further agony duties, and I am familiar with Roxanne Tury Asst. Vice Pres
comply with the provising accept the obligation The name, title or cap	ation, I hereby accept the appointment sions of all statutes relative to the propers of my position as registered agent. Corporation Service Company (Registered agent) acity and address of the person(s) who had	as registered agent and agree to er and complete performance of UU UU U S signature) thas/have authority to manage is/a	act in this capacity. I further as my duties, and I am familiar with Roxanne Turn Asst. Vice Presente:
comply with the provisal accept the obligation The name, title or cap Title or Capacity:	ation, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent. Corporation Service Corporaty By: (Registered ngent active and address of the person(s) who have and Address:	as registered agent and agree to er and complete performance of UU UU U U U U U U U U U U U U U U U	Roxanne Tury Asst. Vice Pres
comply with the provising accept the obligation The name, title or cap	ation, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent. Corporation Service Company By: (Registered ngent accity and address of the person(s) who have and Address: Mare Porosoff	as registered agent and agree to er and complete performance of UU UU U S signature) thas/have authority to manage is/a	Roxanne Tury Asst. Vice Pres Rianter American Address: Steven Russell
comply with the provision accept the obligation The name, title or cap Title or Capacity:	ation, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent. Corporation Service Corporaty By: (Registered ngent active and address of the person(s) who have and Address:	as registered agent and agree to er and complete performance of UU UU U U U U U U U U U U U U U U U	Roxanne Tury Asst. Vice Pres
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comply with the provisit accept the obligation The name, title or cap Title or Capacity: Vice President	ation, I hereby accept the appointment sions of all statutes relative to the propers of my position as registered agent. Corporation Service Company (Registered agent) acity and address of the person(s) who have Porosoff 40 Danbury Road Wilton, CT 06897 Jordan Socaransky 40 Danbury Road	as registered agent and agree to er and complete performance of UUUU (s signature) has/have authority to manage is/a Title or Capacity: Vice President	Roxanne Tury Asst. Vice Pres Asst. Vice Pres Are: Name and Address: Steven Russell 40 Danbury Road Wilton, CT 06840 Howard Fife 40 Danbury Road
comply with the provisal accept the obligation. The name, title or cap Title or Capacity: Vice President Vice President	ration, I hereby accept the appointment sions of all statutes relative to the propers of my position as registered agent. Corporation Service Company By: (Registered agent reacity and address of the person(s) who have and Address: Mare Porosoff 40 Danbury Road Wilton, CT 06897 Jordan Socaransky 40 Danbury Road Wilton, CT 06897	as registered agent and agree to er and complete performance of UUUU (s signature) has/have authority to manage is/a Title or Capacity: Vice President	Roxanne Tury Asst. Vice Pres Asst. Vice Pres Asst. Steven Russell 40 Danbury Road Wilton, CT 06840 Howard Fife
comply with the provisal accept the obligation. The name, title or cap Title or Capacity: Vice President Vice President	ration, I hereby accept the appointment sions of all statutes relative to the propers of my position as registered agent. Corporation Service Company By: (Registered agent Registered agent) Registered agent Registered agent (Registered agent) (Registe	as registered agent and agree to er and complete performance of UU	Roxanne Tury Asst. Vice Pres Name and Address: Steven Russell 40 Danbury Road Wilton, CT 06840 Howard Fife 40 Danbury Road Wilton, CT 06897
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comply with the provisated accept the obligation. The name, title or cap Title or Capacity: Vice President Vice President Jse attachments if necessisticated is a certificate risdiction under the law	Action, I hereby accept the appointment stons of all statutes relative to the propers of my position as registered agent. Corporation Service Conveyy By: (Registered agent Registered agent) (Registered	as registered agent and agree to er and complete performance of Complete performance of Signature) has/have authority to manage is/a Title or Capacity: Vice President Vice President duly authenticated by the official	Roxanne Tury Asst. Vice Pres In and Address: Steven Russell 40 Danbury Road Wilton, CT 06840 Howard Fife 40 Danbury Road Wilton, CT 06897
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comply with the provisand accept the obligation The name, title or cap Title or Capacity: Vice President Vice President Use attachments if neces Attached is a certificate risdiction under the law the translator must be seen. This document is executed.	acity and address of the person(s) who have and Address: Mare Porosoff 40 Danbury Road Wilton, CT 06897 Jordan Socaransky 40 Danbury Road Wilton, CT 06897	as registered agent and agree to the and complete performance of the analysis of the signature) has/have authority to manage is/a Title or Capacity: Vice President Vice President Vice President Of (1) (b), Florida Statutes, Lama (2)	Roxanne Tury Asst. Vice Pres Asst. Vice Pres Are: Name and Address: Steven Russell 40 Danbury Road Wilton, CT 06840 Howard Fife 40 Danbury Road Wilton, CT 06897 al having custody of records in the aslation of the certificate under oal
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Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "WPIP PLANTATION PROPERTY, 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 EIGHTEENTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WPIP PLANTATION PROPERTY, LLC" WAS FORMED ON THE NINTH DAY OF JANUARY, A.D. 2018.

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

Authentication: 201990169

Date: 01-18-18