

MIF 00 0005290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

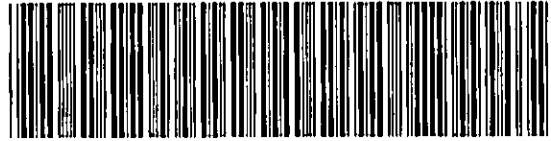
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NANCY S. PITMAN

ATTORNEY AT LAW, LLC

215 PERRY AVENUE
DOTHAN, ALABAMA 36303
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MAIL: POST OFFICE BOX 217
DOTHAN, ALABAMA 36302
FAX: 334-699-6333

MAY 22, 2018

**RE: Registration of Foreign LLC for authorization to
transact business in Florida, with attached Application**

3 W PROPERTIES, L.L.C.

**TO: REGISTRATION SECTION
DIVISION OF CORPORATIONS
STATE OF FLORIDA**

Please find attached the application by a foreign limited liability company in good standing in Alabama, with Certificate Attached, and a check for fees, are submitted to register the above referenced foreign LLC authorization to transact business in Florida.

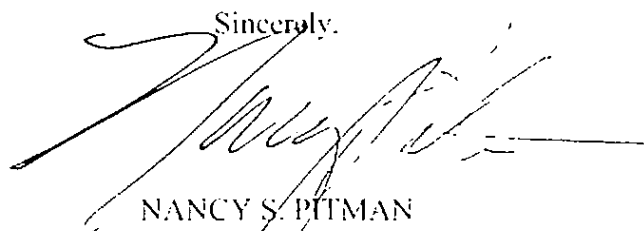
Please return all correspondence concerning this matter to the following:

GARY C. WEEKS, a managing member
3W Properties, L.L.C.
203 Sawgrass Drive
Dothan, Alabama 36303
gary.weeks@mobileattic.com

For further information concerning this matter, please call: **Gary C. Weeks, at (334)618-4948.**

Enclosed is a check for **\$130.00** for Filing Fee and Certificate of Status.

Sincerely,



NANCY S. PITMAN
ATTORNEY AT LAW

NSP/ts. ENC: Appl/Ck/Certf

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. 3W Properties, LLC # 519-215 Entity # AL
(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. State of Alabama 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. n/a
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 203 Sawgrass Dr 6. _____
(Street Address of Principal Office) (Mailing Address)
Dothan, AL Same
36303

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

Name: Wade A. Weeks

Office Address: 1150 Corby Ct. E
Tallahassee, Florida 32317
(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.

Wade A. Weeks
(Registered agent's signature)

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:

Managing
Member

Wade A. Weeks
1150 Corby Ct. E
Tallahassee, FL 32317

Brad E. Weeks
Managing
Member

Brad E. Weeks
901 W. Register Ave
Geneva, AL
36340

Managing
Member

Gary C. Weeks
203 Sawgrass Dr
Dothan, AL 36303

(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.

Wade A. Weeks
(Signature of an authorized person)

WADE A. WEEKS
(Typed or printed name of signer)

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that 3W Properties, LLC was formed in Houston County, Alabama on May 21, 2018. The Alabama Entity Identification number for this entity is 519-215. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20180529000024686

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/29/2018

Date

A handwritten signature in black ink, appearing to read 'J. H. Merrill', is written over a horizontal line.

John H. Merrill

Secretary of State