

8/20/2018

2018-08-20 14:48:17 CST

95108125 From: Ranae McGraw

Division of Corporations

Florida Department of State
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Foreign Limited Liability Company
WSSA Tampa CBP, LLC

Certificate of Status	0
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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. WSSA Tampa CBP, 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. Michigan 3. 82-1902033
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 503 S. Saginaw Street, Suite 600 6. P.O. Box 3597
(Street Address of Principal Office) (Mailing Address)
Flint, MI 48502 Flint, MI 48502

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

Name: John Sabty

Office Address: 6301 Collins Avenue #1802

Miami Beach, Florida 33141
(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.

[Signature]
(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:
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MANAGER

WSSA PROPERTY MANAGEMENT, LLC

P.O. Box 3597

Flint, MI 48502

(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)

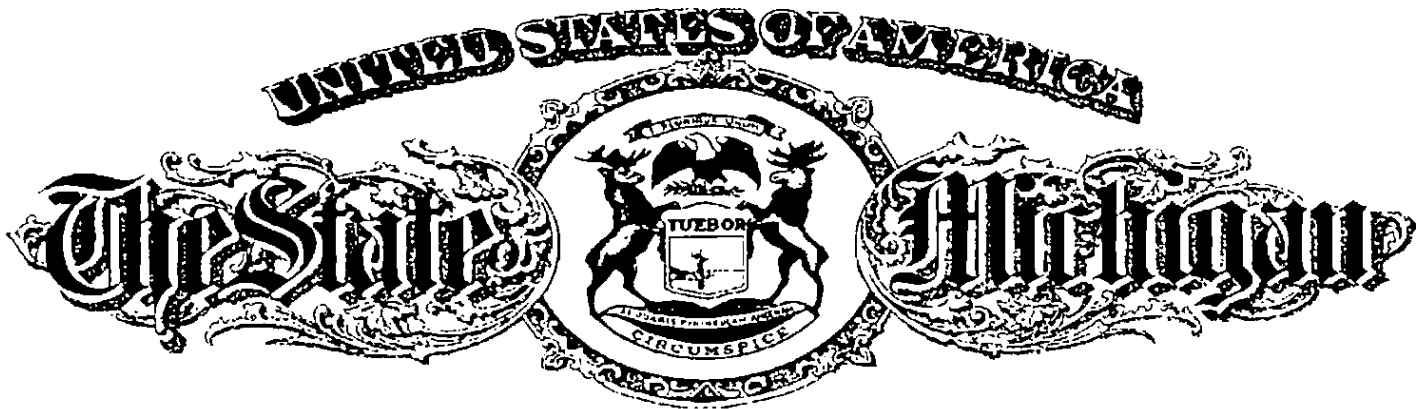
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]
Signature of an authorized person

John Sabty, Manager for WSSA Property Management, LLC

Typed or printed name of signer

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 TALLAHASSEE, FLORIDA



Department of Licensing and Regulatory Affairs
Lansing, Michigan

This is to Certify That
WSSA TAMPA CBP, LLC

was validly authorized on June 22, 2017, as a Michigan DOMESTIC LIMITED LIABILITY COMPANY,
and said limited liability company is validly in existence under the laws of this state and has satisfied its
annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is
in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit
given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 18087407470

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 20th day of August, 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau