

W18000010519

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(Business Entity Name)

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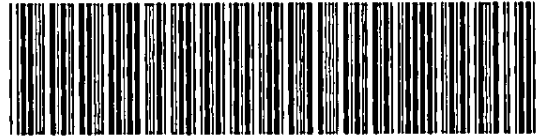
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2018 NOV 27 PM 3:56
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 6, 2018

LYOLE L. WILHELWI
915 19TH AVENUE
SEATTLE, WA 98122

SUBJECT: PANAMA CITY BEACH LLC
Ref. Number: W18000088849

FILED
2018 NOV 27 PM 3:26
TALLAHASSEE, FLORIDA

We have received your document for PANAMA CITY BEACH LLC and your check(s) totaling \$160.00. 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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

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

Deborah Bruce
Corporate Records Supervisor

Letter Number: 218A00020846

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PANAMA CITY BEACH 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:

Lysle L. Wilhelm
Name of Person

PANAMA CITY BEACH LLC
Firm/Company

915 19th Avenue
Address

Seattle, WA 98122
City/State and Zip Code

lysle@winesofwashington.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lysle L. Wilhelm at (206) 851-2735
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

FILED
2011 NOV 27 PM 3:26
TALLAHASSEE, FL

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. PANAMA CITY BEACH LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Washington State 3. 82-3158341
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. January 20, 2013
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 915 19th Avenue 6. _____
(Street Address of Principal Office) (Mailing Address)

Seattle, WA 98122

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

Name: Paula Griffith

Office Address: 409 Breakfast Point Blvd.

Panama City Beach, Florida 32407
(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.

Paula Griffith
(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:
<u>Property manager</u>	<u>Paula Griffith</u> <u>409 Breakfast Point Blvd.</u> <u>Panama City Beach, FL 32407</u>	

Name and Address:
<u>Paula Griffith</u> <u>409 Breakfast Point Blvd.</u> <u>Panama City Beach, FL 32407</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]
Signature of an authorized person

Lyle L. Weinbaum
Typed or printed name of signer

UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

PANAMA CITY BEACH LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 10/01/2017.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 11/13/2018
UBI Number: 604 175 288



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 11/13/2018