

M19000003163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

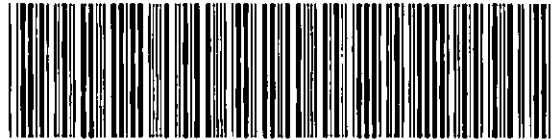
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19-29081 Map

Office Use Only



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FILED
19 MAR 22 AM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 MAR 22 PM 1:55

K. SALY
APR -1 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 693682 7694430

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : March 21, 2019

ORDER TIME : 12:55 PM

ORDER NO. : 693682-010

CUSTOMER NO: 7694430

FOREIGN FILINGS

NAME: WS LONGWOOD, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 25, 2019

CSC / ROXANNE TURNER

SUBJECT: WS LONGWOOD, LLC
Ref. Number: W19000029081

We have received your document for WS LONGWOOD, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please insert the title for "Sean Reynolds",.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 719A00005822

19 MAR 29 PM 4:05

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. WS Longwood, 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. 83-4070414
(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. 3715 Northside Pkwy NW Ste 4-600 6. 3715 Northside Pkwy NW Ste 4-600
(Street Address of Principal Office) (Mailing Address)
Atlanta, GA 30327 Atlanta, GA 30327

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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.

By: Roxanne Turner Roxanne Turner
Corporation Service Company Asst. Vice President
(Registered agent's signature)

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19 MAR 22 AM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☐ Manager Name: Charles Barrus

☒ Member Address: 636 W Yale Street

☐ Authorized Orlando, FL 32804

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Sean Reynolds

☒ Member Address: 636 W Yale Street

☐ Authorized Orlando, FL 32804

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Bryan Borland

☒ Member Address: 636 W Yale Street

☐ Authorized Orlando, FL 32804

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Josh Lynch

☒ Member Address: 636 W Yale Street

☐ Authorized Orlando, FL 32804

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Alexander Panzeri

☒ Member Address: 401 S Dixie Hwy. Ste 303

☐ Authorized West Palm Beach, FL 33401

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Beth Day

☒ Member Address: 3715 Northside Pkwy 4-600

☐ Authorized Atlanta, GA 30327

Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 an authorized person

Beth Day, member, WS Longwood, LLC

Typed or printed name of signer

Delaware

The First State

Page 1


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WS LONGWOOD, 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 TWENTY-SECOND DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WS LONGWOOD, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2019.

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

FILED
19 MAR 22 AM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

7337500 8300

SR# 20192196283

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202498426

Date: 03-22-19