## M900004123

| (Requestor's Name)                      |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |  |
| . (Business Entity Name)                |  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
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Office Use Only



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4.24.19

## COVER LETTER

TO: Registration Section

|                        | Name of Limited Liability Company   |   |   |   |  |  |  |
|------------------------|---|---|---|---|--|--|--|
| iclosed '<br>nce, and  | 'Application by Foreign L'<br>check are submitted to re                                   | mited Liability Compagister the above referen | any for Authoriza<br>need foreign limit | ation to Transact Business in Florida," Certific<br>and liability company to transact business in F                               |  |  |  |
| return a               | ill correspondence concerr  | ing this matter to the f                      | ollowing:                               |   |  |  |  |
|                        | Denise Ruggiero   |   |   |   |  |  |  |
|                        |   | Na  | me of Person                            |   |  |  |  |
|                        | WRB Enterprises, Inc  |   |   |   |  |  |  |
|                        |   | Fir   | m/Company                               |   |  |  |  |
|                        | 1414 W Swann Avenu  | ie, Suite 201                                 |   |   |  |  |  |
|                        |   | <u> </u>                                      | Address                                 |   |  |  |  |
|                        | Tampa, FL 33606   |   |   |   |  |  |  |
|                        |   | Cîty/St                                       | ate and Zip Code                        |   |  |  |  |
|                        | druggiero@wrbenterpri   |   |   |   |  |  |  |
|                        | E-ma  | il address: (to be used                       | for future annua                        | report notification)  |  |  |  |
| rther inf              | ormation concerning this i  | natter, please call:                          |   |   |  |  |  |
| Denise Ruggiero        |   | 813<br>_ at (                                 | 251-3737                                |   |  |  |  |
|                        | Name of Cont  | act Person                                    | Area Code                               | Daytime Telephone Number  |  |  |  |
| Divis<br>Regis<br>P.O. | LING ADDRESS:<br>sion of Corporations<br>stration Section<br>Box 6327<br>hassee, FL 32314 |   |   | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |  |  |  |
| Enck                   | osed is a check for the follower make check payable to:                                   | owing amount:<br>FLORIDA DEPART               | MENT OF STA                             |   |  |  |  |

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. Luz Verde Costa Rica.<br>(Name of Foreign | Limited Liability Company; must include "Limite   | ad Liability Comp                         | any," "L.L.C.," or "LLC.")                 |                               |  |  |
|--|---|---|--|-------------------------------|--|--|
| N/A  |   |   |  |                               |  |  |
| If name unavailable, enter alternate na      | ame adopted for the purpose of transacting business in Flo  | orida. The alternate is                   | ame must include "Limited Liability Compar | ay," "L.L.C," or "LLC ")      |  |  |
| Delaware                                     |   | Pend<br>3                                 | _  |                               |  |  |
| (Jurisdiction under the law of wh            | nch foreign limited liability company is organized)   | J   | (FEI number, if applica                    | ble)                          |  |  |
| N/A  |   |   |  |                               |  |  |
| ·  | (Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ | registration )<br>line penalty liability) |  |                               |  |  |
| 1414 W Swann Ave                             |   | 1414<br>6.                                | W Swann Ave                                |                               |  |  |
| (Street Address of F                         | rincipal Office)  | 6. (Mailing Address)                      |  |                               |  |  |
| Suite 201                                    |   | Suite                                     | 201  |                               |  |  |
| Tampa, FL 33606                              |   | Tampa, FL 33606                           |  |                               |  |  |
| . Name and <u>street addres</u>              | s of Florida registered agent: (P.O. Box  | x <u>NOT</u> accepts                      | able)                                      |                               |  |  |
| Name:  | WRB Serra Partners Fund I Managem   | nent, LLC                                 | -  | 200 (c)<br>200 (c)<br>200 (c) |  |  |
| Office Address:                              | 1414 W Swann Ave, Suite 201   |   | -  |                               |  |  |
|  | Tampa   |   | 33606<br>, Florida                         | #<br>#<br>#                   |  |  |
|  | (City)  |   | (Zip code)                                 | 90 :                          |  |  |

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.

WRB SERRA PARTNERS FUND I MANAGEMENT, LLC

By (Registered agent's signature)

G. Robert Blanchard, Jr., a Member/Manager of Sole Manager

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:

Title or Capacity:

Name and Address:

| Title or Capacity: | Name and Address:                   | Title or Capacity: | _        | Name and Address:                        |
|--------------------|-------------------------------------|--------------------|----------|--|
| Manager            | Name: WRB Serra Partners Fund I     | Manager            | Name:    |  |
| Member             | Address: Management, LLC            | Member             | Address: |  |
| Authorized         | 1414 W Swann, #201, Tampa, FL 33606 | Authorized         |          |  |
| Person             |                                     | Person             |          |  |
| Other              | Other                               | Other              |          | Other                                    |
|                    |                                     |                    |          | •  |
| Manager            | Name:                               | Manager            | Name:    |  |
| Member             | Address:                            | Member             | Address: |  |
| Authorized         |                                     | Authorized         |          |  |
| Person             |                                     | Person             |          |  |
| Other              | Other                               | Other              |          | Other                                    |
|                    |                                     |                    |          | 29 · · · · · · · · · · · · · · · · · · · |
| Manager            | Name:                               | Manager            | Name:    | 1  |
| ☐Member            | Address:                            | Member             | Address: | 17                                       |
| Authorized         |                                     | Authorized         |          |  |
| Person             |                                     | Person             |          | ුල <sup>5</sup>                          |
| Other              | 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

G. Robert Blanchard, Jr., a Member/Manager of Sole Manager



## <u>Delaware</u> The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LUZ VERDE COSTA RICA, 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 FOURTH DAY OF APRIL, A.D. 2019.



7353128 8300 SR# 20192431665

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

Authentication: 202578712

Date: 04-04-19