

Office Use Only

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COVER LETTER

TO: **Registration Section Division of Corporations**

TEP TALLAHASSEE FL, LLC SUBJECT:

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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:

RICHARD I TANENBAUM

Name of Person			
IOLDINGS			
Firm/Company			
Address			-77
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City/State and Zip Co	de		
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s: (to be used for future anni	al report notification)	, <u></u>	ç;
ease call:	. ,		الد
405 at (524-8484	.,	
	le Daytime Telephone Num	ber	
	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	Firm/Company Address OK City/State and Zip Co s: (to be used for future annu ease call: 405 at (Firm/Company Address OK 73102 City/State and Zip Code s: (to be used for future annual report notification) ease call: at (Firm/Company Address OK 73102 City/State and Zip Code Title s: (to be used for future annual report notification) Title ease call: Title

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

\$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

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 FOREKIN, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

TEP TALLAHASSEE FL, LLC

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f name unavailable, enter alternate :	name adopted for the purpose of transacting business in Flo	onda. The alternate name mus	t include "Limited Liability C	ampany," "LLC," or "LLC.")
DELAWARE		3.		
(Isrudiction under the law of w	arch foreign limited liability company is organized)	J	(FEI number, if a	pplicable)
·				
	(Date first transacted business in Florida, if prior to (See sections 603.0904 & 603.0905, F.S. to determ	registration) and penalty bability)		-
211 N. Robinson, Suit	e N1950			2013
(Street Address of	hincipal Office)	6	(Mailing Address)	
Oklahoma City	OK 73102			Ved 3
,, ,				
Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)		CHILL BE
				7.
Name:	Registered Agents Legal Services, LL	c		
Office Address:	155 Office Plaza Drive, Suite A P.O. B	lox 10662		
	Tallahassee,		32301	
	(City)	, Flor	ida (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.

Mul Chiller Michael ASHELY on boald of (Registered spense) Register Agent Legel Source, LCC

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]:

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Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:
Manager	Name:	🗌 Manager	Name:	
Member	Address: 211 N. Robinson, Suite N1950	Member	Address:	
Authorized	Oklahoma City OK 73102	Authorized		
Person	·····	Person		
Other	Other	Other		Other
Manager	Name:	🗌 Manager	Name:	
Member	Address:	Member	Address:	F. 5 T
Authorized		Authorized	- <u></u>	
Person		Person	·	·· · · · · · · · · · · · · · · ·
Other	Other	Other		
				ند بر الم
Manager	Name:	Manager 🗌	Name:	····
Member	Address:	Member	Address:	
Authorized		Authorized		
Person		Person		
Other	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.

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Hai	u	
	Signature of an authorized p	erson

Richard I Tanenbaum

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TEP TALLAHASSEE FL, 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 EIGHTH DAY OF MARCH, A.D. 2019.

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Ded cu, Secretary of State

Authentication: 202400520

Date: 03-08-19

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SR# 20191718994 You may verify this certificate online at corp.delaware.gov/authver.shtml