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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Centra Partners, L.L.C.

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," 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:

Donna Phetteplace

Name of Person

Centra Partners, L.L.C.

Firm/Company

1314 Lake Street, Suite 202

Address

Fort Worth, TX 76102

City/State and Zip Code

donna@centrapartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Phetteplace

Name of Contact Person

at (

817

) Area Code

338-1800

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:

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,
of Status & Certificate

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TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIM
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Centra Partners, L.L.C.
(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.,"

2. Texas
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 75-2514911
(FEI number, if applicable)

4. September 1, 2019
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1314 Lake Street
(Street Address of Principal Office)

6. 1314 Lake Street
(Mailing Address)

Suite 202

Suite 202

Fort Worth, TX 76102

Fort Worth, TX 76102

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

Name: Rachel Darbe

Office Address: 4051 E. Olive

Pensacola, Florida 32514
(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
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I
to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am
and accept the obligations of my position as registered agent.

Rachel Darbe
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Dusty Wolf</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Tina Cavaco</u>
<input checked="" type="checkbox"/> Member	Address: <u>3730 Cypress Creek Pkwy</u>	<input checked="" type="checkbox"/> Member	Address: <u>3730 Cypress</u>
<input type="checkbox"/> Authorized	<u>Suite 300</u>	<input type="checkbox"/> Authorized	<u>Suite 300</u>
Person	<u>Houston, TX 77068</u>	Person	<u>Houston, TX</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input checked="" type="checkbox"/> Manager	Name: <u>Gregory Nelson</u>	<input type="checkbox"/> Manager	Name: <u>Donna Phetteplace</u>
<input type="checkbox"/> Member	Address: <u>3730 Cypress Creek Pkwy</u>	<input type="checkbox"/> Member	Address: <u>1314 Lake St</u>
<input type="checkbox"/> Authorized	<u>Suite 300</u>	<input checked="" type="checkbox"/> Authorized	<u>Suite 202</u>
Person	<u>Houston, TX 77068</u>	Person	<u>Fort Worth,</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____
Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____
Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes or 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 record jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate 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

Donna Phetteplace

Typed or printed name of signer



Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Articles Of Organization for CENTRA PARTNERS, L.L.C. (file number 700489622), a Domestic Limited Liability Company (LLC), was filed in this office on December 09, 1993.

It is further certified that the entity status in Texas is in existence - registered agent notice sent.

In testimony whereof, I have hereunto signed my name
officially and caused to be impressed hereon the Seal
of the State at my office in Austin, Texas, on August 21, 2019.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



A handwritten signature in black ink, appearing to read "Jose A. Esparza".

Jose A. Esparza
Deputy Secretary of State

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