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☐ ЫСК-ПЬ	MAIT	MAIL			
(Business Entity Name)					
(Docur	nent Number	)			
Certified Copies	Certificate	s of Status			
Special Instructions to Fili	ng Officer:				
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Account#: I20000000088

Date: September 23, 2020	Account#: 12000000000
Name: KEN HOWELL	
Reference #:1267376	
Entity Name: WMG REAL E	STATE 2, LLC
Articles of Incorporation/Authorization to Tra	nsact Business
☐ Amendment	:
☐ Change of Agent	ISSUES? CALL
Reinstatement	KEN:
Conversion	518-213-0738
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitious Name	
Other***CERTIFIED CO	PY-UPON-FILING **
Authorized Amount: \$155.00	
Signature	

## COVER LETTER

	Registration Section Division of Corporations				
er in inc	WMG Real Estate 2, LLC				
SOBJEC	· 1 :	Name of Limited Liability Company			
The encle Existence	osed "Application by Foreign Limited Liab e, and check are submitted to register the a	pility Company for Authorization to Transact Business in Florida. bove referenced foreign limited liability company to transact busi	* Certificate of ness in Florida.		
Please re	turn all correspondence concerning this ma	atter to the following:			
	Angel Avalos, Jr.				
	,	Name of Person			
	Schiff Hardin LLP				
		Firm/Company	•		
	te 7100				
		Address	-		
	Chicago, IL 60606				
		City/State and Zip Code			
	aavaios@schiffhardin.com		ώ.		
	E-mail address:	(to be used for future annual report notification)	-		
For furti	ner information concerning this matter, plo	ase call:			
	Angel Avalos, Jr.	312 258-4564	_		
	Name of Contact Person				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following ame Please make check payable to: FLORID.  \$125.00 Filing Fee \$130.00 Filing Certi	A DEPARTMENT OF STATE			

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

IN COMPLIANCE WITH SECTION GOLDNIC, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN. LIMITED LABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

WMG Real Estate 2, I				
(Name of Foreign 1	.tinited Liability Company, must include "Limited	3 1.130miy	Cumpany, a.d.C. of the f	
name gnavailable, enter alternate is	ame adopted for the purpose of inmuscing business in F)	onda The	alternate name nars include "Limited Liability Communy," "Lil. C." or "Lit C	
Delaware		3.		
Ourisdiction under the law of wh	nich foreiten junised hability, combany is orteaused)		(FE) number, if applicable)	
09/30/2020				
	(Date first transacted business in Florida, it prior to (See soutons 605,4944 & 603,0905, F.S. to dearm	ne penaliy	hability)	
do WMG Real Estate, LLC		6	c/c WMG Real Estate, LLC	
reet Address of Principal Office)		0.	(Mailing Address)	
1200 Network Centre	Dr, Suite 2		1200 Network Centre Dr, Suite 2	
Effingham, Illinois 62401			Effingham, Illìnois 62401	
Name and street address	s of Florida registered agent: (P.O. Box	<u> 104</u>	acceptable)	
Name:	Corporation Service Company	····		
Office Address:	1201 Hays Street		<del></del>	
	Tallahassee		32301 Florida	
	(City)		(Zap code)	

Registered agent's acceptance:

thaving 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.

Corporation Service Company

By: Jora Ben application description description

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: WMG Real Estate, LLC Manager Name: 1200 Network Centre Dr Address: \_\_\_\_\_\_ □Member Address: **Member** Suite 2 Authorized Authorized Effingham, Illinois 62401 Person Person □Other\_\_\_\_ □Other \_\_\_\_\_ Other\_\_\_\_ Name: Name: □Manager Manager Address: □ Member Address: □ Member □ Authorized ☐ Authorized Person Person □Other\_\_\_\_\_ Other\_\_\_\_ Other\_\_\_\_ □Other 1 Name: □Manager Name: \_\_\_\_\_\_ □Manager Address: □Member Address: □Member □ 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. Nonindexed 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 Jonathan Brumleve Typed or printed name of signific

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WMG REAL ESTATE 2, 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-FIRST DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WMG REAL ESTATE

2, LLC" WAS FORMED ON THE FIRST DAY OF SEPTEMBER, A.D. 2020.

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

Authentication: 203698607

Date: 09-21-20