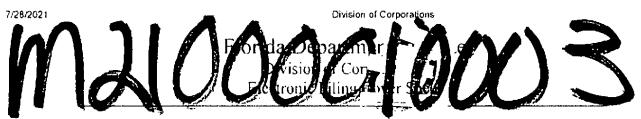
To: 18506176383 Page: 1 of 4 2021-08-03 10:14:44 CDT 12196804255 From: Jason Weisler



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : WHITE/PETERMAN PROPERTIES, INC.

Account Number : I20210000047 Phone : (219)757-3714 Fax Number : (219)757-3510

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: __smustafa@whitepeterman.com_____

Foreign Limited Liability Company WPPI St Pete TC, LLC

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FAX AUDIT NO.: H21000287813 3

WPPI St Pete TC, LLC	WPPI St Pete TC, LLC (Name of Foreign Limited Liability Company: must include "Limited Liability Company." "LLC." or "LLC." o	IN COMPLIANCE WITH SEC COMPANYIOTRANSICT BI	TION 605.0902 FLORIDA STATUTES, THE FOL SINESS INTHE STATE OF PLORIDA:	LOWING IS SUBMITTED TO REGISTE	R A FORFIGN	LIMIT.	7-ID / I-VRIII	
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To: 18506176383 Page, 3 of 4 2021-08-03 10:14:44 CDT 12196804255 From: Jason Weisler

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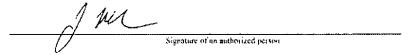
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: WMB Corp	□Manager	Name: J. Matthew Chambers
□Member	Address: 9800 Connecticut Dr	□ Member	Address: 5925 Placida Ave.
□Authorized	Suite A1-100	□ Authorized	Englewood, FL 34224
Person	Crown Point, IN 46307	Person	
Other	Other	■ Other	f MGR □Other
□Manager	Name:	_ Manager	Name:
□Member	Address: 9800 Connecticut Dr.	□ Member	Address:
□Authorized	Suite A1-100	☐ Authorized	
Person	Crown Point, IN 46307	Person	
Secretary o	r MGR □ Other □	_ Other	□Other
∐Manager	Name:	∏Manager	Name:
□Member	Address:		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.

Jason Weisler



Page: 4 of 4



Page 1

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

DELAWARE, DO HEREBY CERTIFY "WPPI ST PETE TC, 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-SEVENTH DAY OF JULY, A.D. 2021.

6111880 8300

SR# 20212804612

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

Authentication: 203769933

Date: 07-27-21