

MAIL 000013708

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PICK-UP WAIT MAIL

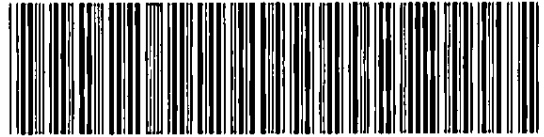
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
2021 OCT 15 AM 11:53
ALABAMA
ATTORNEY GENERAL

A handwritten signature in black ink, appearing to be the initials 'JF' or similar, written in a cursive style.

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 108135 4321791

AUTHORIZATION :

COST LIMIT : \$125.00

A handwritten signature in black ink, appearing to read "Lynette D. Le...".

ORDER DATE : October 14, 2021

ORDER TIME : 9:47 AM

ORDER NO. : 108135-005

CUSTOMER NO: 4321791

FOREIGN FILINGS

NAME: WPB THEATER OWNER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: _____

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

1. WPB Theater Owner LLC
(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." or "LLC.")

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

3. PENDING
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0903 & 605.0905, F.S. to determine penalty liability)

5. 30 Hudson Yards, 72nd Floor
(Street Address of Principal Office)
New York, NY 10001

6. 30 Hudson Yards, 72nd Floor
(Mailing Address)
New York, NY 10001

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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 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.

By: Eykeima Baker
Corporation Service Company
Assistant Vice President
(Registered agent signature)

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: Manager Member Authorized Person Other _____

Name and Address:
 Name: WPB Theater Mezz LLC
 Address: 30 Hudson Yards, 72nd Flr
New York, NY 10001

Title or Capacity: Manager Member Authorized Person Other _____

Name and Address:
 Name: _____
 Address: _____

Manager Member Authorized Person Other _____

Name: _____
 Address: _____

Manager Member Authorized Person Other _____

Name: _____
 Address: _____

Manager Member Authorized Person Other _____

Name: _____
 Address: _____

Manager Member Authorized Person Other _____

Name: _____
 Address: _____

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.

Richard O'Toole

 Signature of an authorized person

Richard O'Toole

 Typed or printed name of signer

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WPB THEATER OWNER 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 FOURTEENTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WPB THEATER OWNER LLC" WAS FORMED ON THE FOURTEENTH DAY OF OCTOBER, A.D. 2021.

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



A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

6306724 8300

SR# 20213517211

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

Authentication: 204416347

Date: 10-14-21