

PROOF

Florida Department of State
Division of Corporations
Electronic Filing System

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000140882 3)))



H180001408823ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

2018 MAY -4 PM 3:11

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CAPITOL SERVICES, INC.
Account Number : 1201600C0017
Phone : (800) 345-4647
Fax Number : (800) 432-3622

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

18 MAY -4 AM 12:12

FILED

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
WW HAWTHORNE GP INC.**

***FILE
FIRST*****

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

***FILE
FIRST***

***PLEASE FILE BEFORE

WW HAWTHORNE LP*****

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: WW Hawthorne GP Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Capitol Services - Corporate Filings Team
Name (Printed or typed)

515 East Park Avenue 2nd Fl

Address

Tallahassee, FL 32301

City, State & Zip

(855) 498 - 5500

Daytime Telephone number

jarrad.principe@olympusproperty.com

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



NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: WW Hawthorne GP Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

500 Throckmorton StreetSuite 300Fort Worth, Texas 76102-3745**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose for which the Entity is formed is for the transaction of any and all lawful business for which a for-profit corporation may be formed under the laws of the State of Florida.

ARTICLE IV SHARESThe number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: W. Chandler Wonderly, President

Name and Title: _____

Address 500 Throckmorton Street

Address: _____

Suite 300Fort Worth, Texas 76102-3745Name and Title: W. Chandler Wonderly, Director

Name and Title: _____

Address 500 Throckmorton Street

Address: _____

Suite 300Fort Worth, Texas 76102-3745

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
18 MAY -4 AM 10:12
SECRETARY OF STATE
ALLAHASSEE FLORIDA

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Capitol Corporate Services, Inc.
Address: 515 East Park Avenue 2nd Fl
Tallahassee FL 32301

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: Jon G. Petersen
Address: 8350 N. Central Expy., Suite 1500
Dallas, Texas 75206

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Kim Tadlock Kim Tadlock, Asst. Secretary on behalf
of Capitol Corporate Services, Inc. May 4, 2018
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Jon G. Petersen May 3, 2018
Required Signature/Incorporator Date