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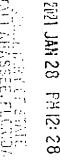
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Jason Weisler Senior Vice President & General Counsel

Direct Dial: (219) 757-3730 Direct Fax: (219) 680-4255 jweisler@whitepeterman.com

January 27, 2021

## Via Federal Express

Department of State Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

RE: Domestication of White/Peterman Properties, Inc. in Florida

Dear Sir or Madam:

Enclosed please find an original and 1 copy of your form Cover Letter, Articles of Domestication. Articles of Incorporation and my check in the amount of \$137.50 in connection with domesticating White/Peterman Properties, Inc. ("WPPI") in the State of Florida. As per the instructions for the Articles of Incorporation, since WPPI is a non-professional corporation. I have left the purpose blank. Further, since the listing of officers and directors is optional. I have also left that blank.

In any event, please call or email me in the event you have any questions or concerns with respect to the enclosed filings. Thank you in advance for your help with this matter.

Sincerely,

. Jason Weisler

### **COVER LETTER**

original

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

Domestication of White/Peterman Properties, Inc. to Florida

\$128.75

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication \$ 50.00

Articles of Incorporation and Certified Copy § 78.75

Total filing fee

OPTIONAL:

Certificate of Status \$ 8.75

From:

Jason Weisler

Name (printed or typed)

9800 Connecticut Drive, Suite A1-100

Address

Crown Point, Indiana 46307

City, State & Zip

219-757-3730

**Daytime Telephone Number** 

jweisler@whitepeterman.com

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

# Articles of Domestication Foreign Corporation Domesticating to Florida

The u	ndersigned, Jason Weisler	SVP and Secretary	
	(Name)	(Title)	
of W	hite/Peterman Properties, Inc.	, a foreign	
-	ration, in accordance with s. 607.11922, Florid stication.		
1.	Then name of the domesticating corporation	White/Peterman Properties, Inc.	
	, , , , , , , , , , , , , , , , , , ,	(Foreign Corporation)	
2.	The jurisdiction and date of its formation is	Indiana, November 13, 2006	
3.	The name of the domesticated corporation is	White/Peterman Properties, Inc.	
	<del></del>	·	
4.	The jurisdiction of formation of the domesticated corporation is Florida		
5.	The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law.		
6.	Attached are Florida Articles of Incorporation	n to complete the domestication	

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

requirements pursuant to s.607.0202, F.S.

(Authorized Signature)

# ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL I	BE:	
White/Peterman Properties, Inc.		
ARTICLE II PRINCIPAL OFF	ICE	
THE PRINCIPAL PLACE OF BUSINESS/MAIL		
		17A
Principal Address	Mailing Address	F6 27
5925 Placida Rd.	9800 Connecticut Dr.	
Englewood, Florida 34224	Suite A1-100	2021 JAN 28 2021 JAN 28 2021 JAN 28
	Crown Point, Indiana 46307	
ADDIOLE III DIDDOCE		<u>ه</u> ک
ARTICLE III PURPOSE  THE PURPOSE FOR WHICH THE CORPORA	TION IS ODGANIZED.	
THE FURFUSE FOR WHICH THE CORFORP	TION IS ORGANIZED.	
ARTICLE IV SHARES		
THE NUMBER OF SHARES OF STOCK IS: $\frac{1}{2}$	.000	
ARTICLE VI REGISTERED	AGENT AND STREET ADDRE	99
THE NAME AND FLORIDA STREET ADDR		
	,	
CT Corporation		
1200 S. Pine Island Road		
1200 S. Fine Island Road	<del></del>	
Plantation, Florida 33324		
HAVING BEEN NAMED AS REGISTERED	AGENT AND TO ACCEPT SERVICE OF F	PROCESS FOR THE
ABOVE STATED CORPORATION AT THE	PLACE DESIGNATED IN THIS CERTIFICA	ATE, I AM FAMILIAR
WITH AND ACCEPT THE APPOINTMENT	AS REGISTERED AGENT AND AGREE TO	ACT IN THIS
CAPACITY.	7	
Denise Bell	,	1/26/2021
Signature/Registered Agent		Date

# ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Name & Title: \_\_\_\_\_\_ Name & Title: \_\_\_\_\_ \_\_\_\_\_\_ Address: Address: Name & Title: \_\_\_\_\_ Name & Title: Address: Address: Name & Title: Name & Title: Address: Address: Name & Title: \_\_\_\_\_\_ Name & Title: Address: Address: I submit this document and affirm that the facts stated herein are true. I am aware that 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/Authorized Person

# **COVER LETTER**

copy

Department of State

**Division of Corporations** 

P.O. Box 6327

Tallahassee, FL 32314

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