



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typewritten)

For Office Use Only

-FILED-

File #: 0005290803

Date Filed: 6/22/2023 12:59:00 PM

1. The name of the entity is: WP5 Meridian II Pad, LLC
2. The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
<input type="checkbox"/> Other: _____ (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)	
4. Jurisdiction of formation: Delaware
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:
14 Corporate Plaza, Suite 120, Newport Beach, CA 92660
(Street Address)

(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
1209 Orange Street, Wilmington, Delaware 19801
(Street Address)

(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)
8. Name and street address of registered agent in Idaho:
National Registered Agents, Inc., 1555 W. Shoreline Drive, Suite 100, Boise, ID 83702
(Name and Address)
9. The name, capacity, and mailing address of at least one governor:

<u>PMW Manager, LLC</u>	<u>Manager</u>	<u>14 Corporate Plaza, Suite 120, Newport Beach, CA 92660</u>
(Name)	(Capacity)	(Address)
_____ (Name)	_____ (Capacity)	_____ (Address)

Secretary of State use only

Typed Name: Patrick Wood

Signature: 

Capacity: Manager of PMW Manager, LLC, Manager

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Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WP5 MERIDIAN II PAD, 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 JUNE, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WP5 MERIDIAN II PAD, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JUNE, A.D. 2023.

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



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SR# 20232812143

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

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.

Jeffrey W. Bullock, Secretary of State

Authentication: 203590105

Date: 06-21-23

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