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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Vencore Solutions LLC

Certificate of Status	0
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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. VanCores Solutions LLC
(Name of Foreign Limited Liability Company)
2. Delaware 3. 71-0878152
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 10/27/2005 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. 03/30/2007
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4500 SW Kruse Way Suite 350, Lake Oswego, OR 97035
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:

Marc Sois, D.E. Shaw & Co., LP 39th Flr, Tower 45 120th West 45th Street, New York, NY 10036

Robb Ladd, Laminar Direct Capital OP, Inc. 10000 Memorial Drive, Houston, TX 77024


John Griggs, Laminar Direct Capital GP, Inc. 10000 Memorial Drive, Houston, TX 77060

10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

SEE ATTACHMENT

11. Nature of business or purposes to be conducted or promoted in Florida: _____

Provide equipment leasing and loans



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LEONARD LUDWIG

Typed or printed name of signee
Manager

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ALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

VenCore Solutions LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System
(Name)

1200 South Pine Island Road
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Plantation FL 33324
City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

C T Corporation System

By: *Lori D. Stuhlman*
(Signature)

Lori D. Stuhlman, Assistant Secretary/sun

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

**Attachment to Florida
Member/Manager Information**

1	Full Name:	Jim Forrester
	Member/Manager:	Manager
	Business Address:	c/o Growth Capital Partners 363 N. Sam Houston Pkwy E. Suite 500
	City:	Houston
	State:	TX
	ZIP Code:	77060
2	Full Name:	Leonard Ludwig
	Member/Manager:	Manager
	Business Address:	4500 SW Kruse Way, Suite 350
	City:	Lake Oswego
	State:	OR
	ZIP Code:	97035

Delaware

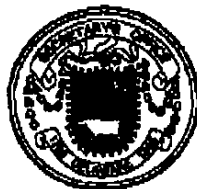
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VENCORE SOLUTIONS 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 TENTH DAY OF MAY, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VENCORE SOLUTIONS LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2005.



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5665499

DATE: 05-10-07