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TALL A HASSEF FLORING

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CPE Holding Con	npany, LLC ne of Limited Liability Company	
The enclosed "Application by Foreign Limited Liabil Existence, and check are submitted to register the abo		
Please return all correspondence concerning this matt	ter to the following:	
John M.S	owgert	
	Name of Person .	
CPE Holdin	ng company, L	LC
237 Lanca	Address	
	Address	
Devon, PA	19333 City/State and Zip Code	2013 AUG 27 SEGGETARY SALLAHASS
ACCTNGO	O SURGENTMC CON to be used for future annual report no	
For further information concerning this matter, please		Iffication) F STATE LORID
Kristin Leanard Name of Person	at (<u>610</u>) <u>99</u> Area Code & Daytime Telephor	14-9604 ne Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amour \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}}\$ \$\Bigsim \mathbb{\text{\$130.00 Filing Certificate of S}}\$	Fee & \$155.00 Filing Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT 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: OPE Holding Company, 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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date of Organization) August 19,2013 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 9104 Birch Run Lane Tallahassee, FL 32312
(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: SM Investment Partners, LLC 224 County Line Road, Wayne PA John M. Surgent, 237 Lancaster Ave., Doson, PA 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: New employee will be providing administrative services from his home in Florida Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of his document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.) Tohn M. SwaevT

Typed or Frinted name of signee

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:	
Cre Holding Company, LC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	Aggrange publication and an analysis of the same
NRAI Services InC . (Name)	7. 2
1200 South Pine Island Read Florida Street Address (P.O. Box NOT ACCEPTABLE)	FILE E
Plantation FL 33324 City/State/Zip	3
Having been named as registered agent and to accept service of process for the above st	tated 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.

Lonita Raney, Assistant Secretary

(Signaturb)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CPE HOLDING COMPANY, 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-EIGHTH DAY OF MAY, A.D. 2013.

4745133 8300

130423464

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 0460845

DATE: 05-28-13

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