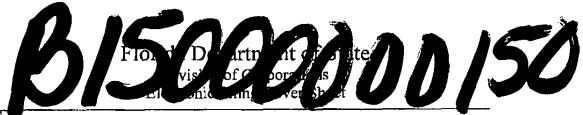
Division of Corporations

Page 1 of 2



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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES

Account Number: 120020000094

Phone

: (770)777-2091

Fax Number

: (770)220-1943

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/FOREIGN LP/LLLP MARABU NORTH AMERICA LP

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COVER LETTER

TO:	Registration Sec Division of Corp							
SUBJE	CT, MARABU	NORTH AMERICA LP						
00.000		e of Foreign Limited Partr	ership or Limited I	liability Limited Part	nership			
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ELISSA	4 HART							
		Contact Person		-				
SMITH	i, gambrell &	RUSSELL, LLP						
		Firm/Company		-				
1230 P	EACHTREE ST.	NE, SUITE 3100						
		Address		-				
ATLAN	NTA, GA 30309			_				
	Ci	ty, State and Zip Code				<u></u> Z <u>∽</u>	~	
	r@sgrlaw.co			_			20 15	
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For furth	her information o	oncerning this matter, pleas	se call:			0	Z I	
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Registra Division Clifton I 2661 Ex	T ADDRESS: tion Section of Corporations Building coutive Center Ci see, FL 32301	rcle	MAILING ADD Registration Sect Division of Corp P. O. Box 6327 Tallahassee, FL	on prations				

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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

Acceptable Limited Partnership suffixes: Limited Part	Liability Limited Partnership, which must include suffix) tnership, Limited, L.P., LP, or Ltd. sas: Limited Liability Limited Partnership, U.L.L.P. or LLLP.
If name unavaidable, name under which the finited publishess in F	arthership or limited liability limited partnership proposes to register to transact Florida; must contain acceptable suffix.
2. GEORGIA	·
State or Country of Formation	Date of Formation
4. Federal Employer Identification Number: 26-081	3372
5. Name of Registered Agent for Service of Process SMITH, GAMBRELL, & RUSSELL, LLP	and Florida Street Address:
50 NORTH LAURA ST., SUITE 1900	
JACKSONVILLE, FL 32202	
By:	Instant of Rogistered Agent 8. Mailing Address: 2460A REMOUNT ROAD
NORTH CHARLESTON, SC 29406	NORTH CHARLESTON, SC 29406 97 2
9. If limited partnership is a limited liability limited	
Street Address: 1230 PEACHTRIEE ST. NE, SUI ATLANTA, GA 30309	CORP. Name of General Partner:
ATLANTA, GA 30309 Name of General Partner: F50000340 Street Address:	Name of General Partner: Street Address:
	Mailing Address:

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

Name of General	Page Partner:	1 of 2 Name of General Partner:
Street Address:		Street Address:
Malling Address:		Mailing Address:
11. Effective date, if (Effective date cannot	other than the date of filing: he prior to nor more than 90 days after the da	pe this document is filed by the Florida Department of State.)
Florida Department of	f State, by the Secretary of State or other offici-	than 90 days prior to the delivery of this application to the dhaving custody of the entity's records in the jurisdiction under
Signed this	day of JUNE.	20 15
	BY: MARABU HOX	INCORP. -HANS-MICHAEL KRAUS, SECRETARY general partner
		in are true and the individual is aware that false information

Page 2 of 2

\$52,50 \$8,75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.

2015 JUN -5 P 2: 49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta. Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED : August 22, 2007 JURISDICTION

:07071390 : Georgia

PRINT DATE

: June 05, 2015

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

MARABU NORTH AMERICA LP A Domestic For-Profit Limited Partnership

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State

B: P.h.

Tracking #: 6zYyKggK