

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1200005214

**FILED**  
**Apr 12, 2013**  
**Secretary of State**  
**CC2213241545**

**Entity Name:** GEOSAM CAPITAL US GP LLC

**Current Principal Place of Business:**

84 CHAIN LAKE DRIVE  
SUITE 500  
HALIFAX NOVA SCOTIA B3S 1A2,

**Current Mailing Address:**

84 CHAIN LAKE DRIVE  
SUITE 500  
HALIFAX NOVA SCOTIA B3S 1A2, XX

**FEI Number:** 46-0618453

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	MCLEAN, GEOFFREY ADAM	Name	PHAM, MARTIN
Address	84 CHAIN LAKE DR SUITE 500	Address	84 CHAIN LAKE DRIVE SUITE 500
City-State-Zip:	HALIFAX NOVA SCOTIA B3S1A2	City-State-Zip:	HALIFAX NOVA SCOTIA B3S1A2

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GEOFFREY ADAM MCLEAN

**MANAGER**

**04/12/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date