| (Re | questor's Name) | |
|---------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to I | Filing Officer: | 1P |
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M. HODGES

COBB & EISENBERG LLC

ATTORNEYS

MATTHEW S. EISENBERG*

JONAS C. KATZ**

JEFFREY B. COBB*

PAUL KELLY'
ERIC L. ROSS***

*Admitted in CT and NY

* "Admitted in NY only

***Admitted in NY and NJ only

329 RIVERSIDE AVENUE
WESTPORT, CONNECTICUT 06880
TELEPHONE (203) 222-1940 FACSIMILE (203) 222-1943
www.cobbeisenberg.com

Two Soundview Drive, Suite 100 Greenwich, Connecticut 06830 Telephone (203) 622-7600

August 2, 2005

VIA OVERNIGHT MAIL

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: Collins Capital Long/Short Equity Fund II, LP

Dear Sir or Madam:

Enclosed for filing please find (a) the Application by Foreign Limited Partnership for Authorization to Transact Business in Florida (2 copies) by Collins Capital Long/Short Equity Fund II, LP (the "Partnership"), a Delaware limited partnership, (b) an Affidavit of Capital Contributions for a Foreign Limited Partnership by the Partnership, along with (c) a check in the amount of \$1,785 made payable to the Florida Department of State, in satisfaction of the applicable filing fees.

Please acknowledge receipt of this letter and the enclosed documents by date stamping the duplicate of this letter and returning it in the self-addressed stamped envelope. Should you have any questions regarding this matter or require any further documentation, please do not hesitate to call the undersigned at (203) 222-1940.

Sincerely,

Megan Hogan Senior Paralegal

Enclosures

cc: Collins Capital Advisors, Inc.

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| Collins Capital Long/Short Equity Fund II, I (Name of limited | P partnership as it is in the home state) | |
|---|---|----------------|
| · | - | |
| | | |
| | nited partnership proposes to register or transact business in I the word "LIMITED" or "LTD.") | lorida; |
| Delaware | 4. December 24, 2003 | |
| (State of Formation) | (Date of Formation) | |
| Dorothy C. Weaver | | |
| (Name of Regist | ered Agent for Service of Process) | |
| c/o Collins Capital Advisors, Inc., 806 Doug | las Road, Suite 570, Coral Gables, FL 33134 | |
| | ddress of Registered Office) | |
| Coral Gables | , Florida 33134 | |
| (City) | (Zip Code) | |
| (Age c/o National Corporate Research, Ltd., 615 S | outh Dupont Highway, Dover, DE 19901 | |
| | | |
| (Address of registered office required in sta | ate of formation or, if not required, address of principal office | i.) |
| . NAMES OF GENERAL PARTNERS | STREET ADDRESS | |
| Collins Capital Advisors, Inc. 806 Douglas | Road, Suite 570, Coral Gables, FL 33134 | |
| F02-4607 | · | |
| | | _3 |
| | | — ; <u> </u> |
| | | 3 |
| o c/o Collins Capital Advisors. Inc., 806 Dou | glas Road, Suite 570, Coral Gables, FL 33134 | <i>'</i> |
| | es and Contributions of Limited Partners are kept.) | _ |

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

| 12. c/o Collins Ca | pital Advisors, Inc., 806 Douglas Road, Suite 570, Coral | Gables, FL 33134 |
|--|---|--|
| | (Mailing Address of Limited Partnership | o) |
| Under penalties of and that the facts st | perjury I, being duly sworn, declare that I have read the for- ated herein are true and correct. | egoing and know the contents thereof |
| Signed this \ | day of July | , 2005 |
| | Collins Canital Advisors Inc. the General Partner | us |
| | Collins Capital Advisors, Inc. the General Partner | |
| COUNTY OF | MIAMI- DADE | |
| On this | 8th day of July, 2005. | - |
| | 1 714 0 11 - 110 | personally appeared before me, |
| who is personall | y known to me | |
| whose identity I | proved on the basis of | |
| | | |
| | Mariana L. Sully | MANNE L. SCUMMIN |
| | Marianne L Scully (Notary's Printed Name) | * #DD 406446 |
| Scal | My Commission Expires: 3/13/09 | Sonday may all the sound of the |

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

| BEFORE ME the undersigned personally appeared Dorothy C. Weaver, Chairman of Collins Capital Advisors, Inc. |
|---|
| a general partner of Collins Capital Long/Short Equity Fund II, LP, a (an) Delaware |
| limited partnership, hereinafter referred to as the "Partnership", who certifies as follows: |
| 1. The amount of capital contributions of the limited partners is \$61,586, 442. |
| 2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of |
| transacting business in Florida is \$\frac{10,000,000}{}. |
| |
| Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof an |
| that the facts stated herein are true and correct. |
| Signed this $\frac{18+7}{12}$ day of $\frac{111}{12}$, $\frac{1}{12}$ |
| |
| Dorothy & Uleaux |
| General Partner Dorothy C. Weaver, Chairman of Collins Capital Advisors, Inc., the general partner |
| STATE OF FZOLDA |
| COUNTY OF MIMMI - DADE |
| On this 8th day of July , 2005, |
| SOROTHY C. WENVER , personally appeared before me, |
| <u> </u> |
| Who is personally known to me |
| whose identity I proved on the basis of |
| |
| Marianne Scully (Notary Public Signature) |
| (Notary Public Signature) May Commission Expires: 3 3 09 #DD 40644F #DD 40644F #DD 40644F |
| teal My Commission Expires: 3 13 09 |