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(Requestor's Name)

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(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR

OCT - 1 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 731036 7667927

AUTHORIZATION :

COST LIMIT : \$ 1000.00

*Lyndee*

ORDER DATE : September 22, 2008

ORDER TIME : 12:46 PM

ORDER NO. : 731036-290

CUSTOMER NO: 7667927

FILED  
08 SEP 30 AM 8:15  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: PLACEMENT PROS LP

EFFECTIVE DATE 9/30/08

\*\*\*\*\*FILE 2ND\*\*\*\*\*

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX\_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds -- EXT# 2933

EXAMINER: \_\_\_\_\_

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

1. PLACEMENT PROS LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership  
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware

(State or Country of Formation)

3. 5/29/07

(Date of Formation)

4. Corporation Service Company

(Name of Registered Agent for Service of Process)

5. 1201 Hays Street

(Florida street address for Registered Agent)

Tallahassee, FL 32301

6. 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 relative to the proper and complete performance of my duties,  
and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: Jeanine Reynolds

Signature of Registered Agent

**Jeanine Reynolds**  
**as its agent**

7. 60 Harvard Mill Square, Wakefield, MA 01880

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 60 Harvard Mill Square, Wakefield, MA 01880

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

Vedior General Partner (US) LLC

(Name)

60 Harvard Mill Square

(Street Address)

Wakefield, MA 01880

*M 08000004328*

60 Harvard Mill Square

(Mailing Address)

Wakefield, MA 01880

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)
_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)


11. Effective date, if other than the date of filing: 9/30/2008

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 15<sup>th</sup> day of September, 20 08

Signature of a general partner:

\_\_\_\_\_

Vedior General Partner (US) LLC, GP

By: Vedior Holding US, Inc., Member

Sean Bradley, Secretary

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

# Delaware

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## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PLACEMENT PROS LP" 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 FIRST DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PLACEMENT PROS LP" WAS FORMED ON THE TWENTY-NINTH 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 ANNUAL REPORTS HAVE BEEN FILED TO DATE.



4360625 8300

081001899

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6886289

DATE: 10-01-08