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EXAMINER



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NAME:

GCM GLOBAL PARTNERS, L.P.

TYPE OF FILING: APPLICATION TO TRANSACT BUSINCESS

COST:

CKATTACHED \$155 | 05V.50

RETURN: CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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

1.	GCM GLOBAL PARTNERS, L.P.	1	
	(Name of Limited Partnership or Limited Liability Limited Partnership, which must include ceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.	*	
	coptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnersh LLAP.	ip, L.L.L.	1. 1.5 1.
_	(If name unavailable, name under which the limited partnership or limited liability limited p	arlnerghi	- .
	proposes to register to transact business in Florida; must contain acceptable suffix.		P
2.	Delaware 3. January 14, 2009		
-	(State or Country of Formation) (Date of Formation)		
4	Eric McKenna c/o Gables Capital Management, Inc.		
	(Name of Registered Agent for Service of Process)		
5	1201 Brickell Avenue, Suite 440		
-	(Florida street address for Registered Agent)		
	Miami, Florida 33131		
con	I hereby accept the appointment as registered agent and agree to act in this capacity. I furningly with the provisions of all statutes relative to the proper and complete performance of middle and accept the obligations of my position as registered agent.		e te
	V		
	Signature of tegistered Agent		
7.	1201 Brickell Avenue, Suite 440		
	(Principal office address)		
	Miami, Florida. 33131		

Page 1 of 3

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

9. 1201 Brickell Avenue, Suit	
Miami, Florida 33131	iling address)
10. Name, principal office address, and r	mailing address of each general partner:
Eric McKenna	c/o Gables Capital Management, Inc.
(Name)	(Street Address) 1201 Brickell Avenue, Suite 440
	Miami, Florida 33131 (Muiling Address)
Jolin Neiwigh (Name)	40 GABIES Capital Management, IN. 1201 Bricker Address) Miami, R 33131
litual Avorovitz	(Mailing Address) C/O GABIES Capital Haragement, IN (Street Address) 1201 Brown Avenue Soite 440
•	(Mailing Address) (Mailing Address)
(Name)	(Street Address)
	(Mailing Address)

Page 2 of 3

(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
11. Effective date, if other than the date of	filing:
(Effective date cannot be prior to no filed by the Florida Department of S	or more than 90 days after the date this document is State.)
to the delivery of this application to	ence duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of ly of the entity's records in the jurisdiction under the
Signed this 23'2 day	of <u>January</u> , 20 09
Signature of a general partner:	<i>'</i>
1/2	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "GCM GLOBAL PARTNERS, L.P." 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-SEVENTH DAY OF JANUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GCM GLOBAL PARTNERS, L.P." WAS FORMED ON THE FOURTEENTH DAY OF JANUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4644917 8300

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AUTHENTY CATION: 7102092

DATE: 01-27-09

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