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FLORIDA/FOREIGN LP/LLLP

Sun Fluid Routing Solutions V, LP

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S. HAWKES

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

1. SUN FLUID ROUTING SOLUTIONS V, 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 L.L.L.P.

(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. MAY 15, 2007

(Date of Formation)

4. CT CORPORATION SYSTEM

(Name of Registered Agent for Service of Process)

5. 1200 SOUTH PINE ISLAND ROAD

(Florida street address for Registered Agent)

PLANTATION, FL 33324

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.

  
Signature of Registered Agent

Kristine Heiberger  
Assistant Secretary

7. 5200 TOWN CENTER CIRCLE, SUITE 600

(Principal office address)

BOCA RATON, FL 33486

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

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9. \_\_\_\_\_  
(Mailing address)

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

SUN HOLDINGS V, LLC  
(Name)

5200 TOWN CENTER CIR., STE. 600  
(Street Address)

1708-4310

BOCA RATON, FL 33486  
(Mailing Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Street Address)

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(Mailing Address)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Street Address)

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(Mailing Address)

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_____	_____
(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 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 24 day of MARCH, 2009

Signature of a general partner:  
SDN HOLDINGS V, LLC

Mark Hajduch  
MARK HAJDUCH, VICE PRESIDENT

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

# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUN FLUID ROUTING SOLUTIONS V, 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 TWENTY-FIFTH DAY OF MARCH, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.


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

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 7207352

DATE: 03-25-09