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JUN 11 2009

**EXAMINER** 



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### **COVER LETTER**

**TO:** Registration Section

Division of Cor	porations		
SUBJECT: ML CAS	SA II, L.P.	r 1 2 4 7 1 4 112 7 1 1 1	4-d D-ddis
(Name of For	eign Limited Partnership	or Limited Liability Limi	ted Partnership)
	imited liability limite	ed partnership to trans	ted to register a foreign act business in Florida.
Maureen Cullen			
	(Contact Person)		
Corporation System	n Company		
	(Firm/Company)		
2711 Centerville Re	oad, Suite 400		
	(Address)		
Wilmington, DE 19	808		
(Cit	y, State and Zip Code)		
For further information	concerning this mat	ter, please call:	
Maureen Cullen	-	at (800 ) 92°	7-9800 ext 3162
(Name of Contact	Person)		aytime Telephone Number)
Enclosed is a check for	the following amou	nt:	
(\$965 Filing Fee and a	\$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy	\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	Circle	MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27

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

1. ML CASA II, L.P.  (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.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. DE 3. 7-3-2002		
(State or Country of Formation) (Date of Formation)		
4. Corporation Service Company	_	DIV.
(Name of Registered Agent for Service of Process)	<u>9</u>	<u> </u>
5,1201 Hays Street	09 MAY 1 1	22
(Florida street address for Registered Agent)		45
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 an accept the obligations of my position as registered agent.	AH 10: 31	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
By: Mulle Cull Signature of Registered Agent		**************************************
7. 2711 Centerville Road, Suite 400; Wilmington, DE 19808 (Principal office address)		
If limited partnership is a limited liability limited partnership, check hav		

Page 1 of 3

*· <u></u>	(Mailing address)		
10. Name, principal office address, and mailing address of each general partner:			
James Martha	1 Financial Plaza		
(Name)	19th Floor (Street Address)		
	Hartford, CT 06103		
	(Mailing Address)		
James O'Brien	737 N. Michigan Ave.		
(Name)	Suite 1700 (Street Address)		
	Chicago, IL 60611		
	(Mailing Address)		
Kathy Clark	1 Financial Plaza		
(Namc)	(Street Address) 19th Floor		
	Hartford, CT 06103		
	(Mailing Address)		
Douglas Denyer (Name)	1 Financial Plaza		
	19th Floor (Street Address)		
	Hartford, CT 06103		
	(Mailing Address)		

Page 2 of 3

Megan Wolfinger	737 N. Michigan Ave	
(Name)	Suite 1700 (Street Address)	
	Chicago, IL 60611	
	(Mailing Address)	
Christopher Yarbrough	737 N. Michigan Ave	
(Name)	Suite 1700 (Street Address)	
	Chicago, IL 60611	
	(Mailing Address)	
filed by the Florida Department of S  12. Attached is a certificate of existe to the delivery of this application to State or other official having custod law of which it is organized.	or more than 90 days after the date this document is	
Signed this 2nd day of	of	
Signature of a general partner:	Discourse of the second of the	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75	

Page 3 of 3

## Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "ML CASA II, 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-NINTH DAY OF APRIL, A.D. 2009.

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

3544073 8300

090408194

AUTHENTICATION: 7271665

DATE: 04-29-09

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