

B 0900000072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

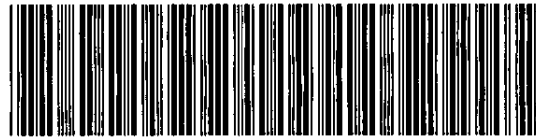
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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15 AUG 11 AM 9:52
SEP 25 2015
J SHIVERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2015

CORPORATION SERVICE COMPANY
COURTNEY WILLIAMS

SUBJECT: ML CASA II, L.P.
Ref. Number: B09000000072

RESUBMIT

Please give original
submission date as file date.

We have received your document for ML CASA II, L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 015A00018303

RECEIVED
15 SEP 23 AM 11:08
TO ADOPTIVE
SUFFICIENCY OF FILING

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 742057 7288091

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 52.50

ORDER DATE : August 11, 2015

ORDER TIME : 11:38 AM

ORDER NO. : 742057-005

CUSTOMER NO: 7288091

FOREIGN FILINGS

NAME: ML CASA II, L.P.

☐ CORPORATE
☒ LIMITED PARTNERSHIP
☐ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

**AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR
FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:

ML CASA II, L.P.

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: _____

2. The jurisdiction of its formation is: DE

3. The date the entity was authorized to transact business in Florida is: B09000000072

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name: _____

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.

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

Global Investors GP, L.L.C. - Document # M02000001114

730 Third Avenue, MS 730/12/02, NY, NY 10017

☒ Add

☐ Remove

☐ Change

JAMES MARTHA

1 FINANCIAL PLAZA, 19TH FLOOR HCT/00/00, HARTFORD CT 06103

☐ Add

☒ Remove

☐ Change

KATHY CLARK

1 FINANCIAL PLAZA, 19TH FLOOR HCT/00/00, HARTFORD CT 06103

☐ Add

☒ Remove

☐ Change

MEGAN WOLFINGER

737 N MICHIGAN AVE STE 170, CHICAGO IL 60611

☐ Add

☒ Remove

☐ Change

JAMES O'BRIEN

737 N MICHIGAN AVE STE 170, CHICAGO IL 60611

☐ Add

☒ Remove

☐ Change

DOUGLAS DENYER

737 N MICHIGAN AVE STE 170, CHICAGO IL 60611

☐ Add

☒ Remove

☐ Change

CHRISTOPHER YARBROUGH

737 N MICHIGAN AVE STE 170, CHICAGO IL 60611

☐ Add

☒ Remove

☐ Change

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

☐ The entity elects to be a limited liability limited partnership.

☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. 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.)

Signature of a general partner: ML CASA II, L.P., a Delaware LP
By Its General Partner, ML CASA II Management, LLC, a Delaware LLC
By Its Manager, Global Investors GP, L.L.C., a Delaware LLC

Typed or printed name:

Ann Medeiros, Assistant Secretary

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

DEPT OF STATE
DIVISION OF CORPORATE
REGISTRATION
18 AUG 11 AM 9:52
TALLAHASSEE, FLORIDA