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## FLORIDA/FOREIGN LP/LLLP

Sun Capital Partners IV, LP

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J. BRYAN

MAR - 4 2009

**EXAMINER** 

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

| imited Parinership, Linership suffices: Limited the limited partnership business in Florida; m. 3. | urborthip, which must include adjuited, L.P., L.P., or Ltd.  I Liability Limited Partnership, L. or limited liability limited partner ast contain socoptable suffix.  03/21/2005 ate of Formation  | Y OF STA  |
|--|--|---|
| business in Florida; m<br>3  | ust contain enceptable suffix. 03/21/2005  | RIDA  |
| 3D   |  |   |
| D  | ete of Rometion  |   |
|  | TOO O. 2 Gelishuran  |   |
| ORPORATION SY  | STEM   |   |
| stered Agent for Service   |  | <del></del>   |
| OUTH PINE ISLAN  | ID ROAD  |   |
| ect address for Register   | ad Agent   |   |
| NTATION, FL 333  | 324  | ·<br>   |
| lative to the proper and   | l camplete performance of my duit<br>registered agent.   | gree to<br>ks,  |
| turbof Registered Ago  | Astriley Pipes   |   |
| CENTER CIRCLE  | SUITE 600  |   |
| rinnipal office address  |  |   |
| A RATON, FL 334  | 186  |   |
|  | OUTH PINE ISLAN cet address for Registers NTATION, FL 333 stered agent and agree ilative to the proper and illans of my position as a sure of Registered Age CENTER CIRCLE rhanipal office address | outh PINE ISLAND ROAD  cet address for Registered Agent  NTATION, FL 33324  istered agent and agree to act in this capacity. I further a clative to the proper and complete performance of my duit illons of my position as registered agent.  Assistant Socretary Adulty Pipes  analysis of Registered Agent  CENTER CIRCLE, SUITE 600 |

|  | NTER CIRCLE, SUITE 600 alling address) |   |
|--|--|---|
| BOCA R   | ATON, FL 33486                         | ACC OF  |
| 10. Name, principal office address, and #B06000000285 SUN CAPITAL ADVISORS IV. LP Name |  | 10 MAR -3 AM 8: 26 SECRETARY OF STATE FALLAHASSEE. FLORIT |
|  | Mailing Address                        | RIDA  |
| Namo   | Street Address                         | <b>-</b><br>-   |
|  | Mailing Address                        | <b>-</b>  |
| Name   | Street Address                         | <u>.</u><br>-   |
|  | Mailing Address                        | •<br>-  |
| Name   | Street Address                         | <u>.</u>  |
|  | Mailing Address                        |   |

| Name   | Street Address   |    |
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|  | Mailing Address  |    |
|  | HEAD SON   |    |
| Name   | Street Address  Mailing Address  |    |
| ٠.   | Mailing Address  |    |
|  |  |    |
| 11. Effective date, if other than the date of £                                  | nB:  | ٠. |
| (Effective date cannot be prior to not<br>filed by the Florida Department of St  | more than 90 days after the date this document is<br>te.)  |    |
| to the delivery of this application to t   | to duly authenticated, not more than 90 days prior  Florida Department of State, by the Secretary of  the entity's records in the jurisdiction under the |    |
| Signed this 2nd day of   | MARCH  | :  |
| Signature of a general partner. SUN By: S  By: MARK HAJDUCH  Its: VICE PRESIDENT | APITAL ADVISORS IV, LP IN CAPITAL PARTNERS IV, LLC IU GENERAL PARTNER  | •  |
| Certified Copy (optional):   | 1,000.00 (\$965 Piling Fee and \$35 Registered Agent Fee) 52.50 8.75   |    |

Page 3 of 3

## Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUN CAPITAL PARTNERS IV, 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 SECOND DAY OF MARCH, A.D. 2010.

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

TION:

DATE: 03-02-10

7843040