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(Requestor's Name)

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☐ PICK-UP

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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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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2010 OCT 22 PM 4: 22
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

B. KOHR
NOV - 4 2010
EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV - 4 PM 2: 56



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 25, 2010

SUSIE KNIGHT
CSC
TALLAHASSEE, FL

SUBJECT: BLACKBEARD CAPITAL MANAGEMENT LP
Ref. Number: W10000050006

RESUBMIT

Please file 2nd

We have received your document for BLACKBEARD CAPITAL MANAGEMENT LP and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Before this limited partnership can be filed, its general partner -- BLACKBEARD CAPITAL MANAGEMENT HOLDINGS LLC -- must be qualified in Florida.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 010A00025106

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

10 NOV -4 PM 1:39

RECEIVED



CORPORATION SERVICE COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV -4 PM 2:56

ACCOUNT NO. : I20000000195

REFERENCE : 552418 7460691

AUTHORIZATION :

COST LIMIT : \$ 1052.50

Sydney Coleman

ORDER DATE : October 22, 2010

ORDER TIME : 4:02 PM

ORDER NO. : 552418-015

CUSTOMER NO: 7460691

RESUBMIT

FOREIGN FILINGS

NAME: BLACKBEARD CAPITAL MANAGEMENT
LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: _____

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV -4 PM 2:56

1. Blackbeard Capital Management 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 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. Delaware

(State or Country of Formation)

3. September 9, 2010

(Date of Formation)

4. Corporation Service Company

(Name of Registered Agent for Service of Process)

5. 1201 Hays Street

(Florida street address for Registered Agent)

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 and accept the obligations of my position as registered agent.

Corporation Service Company

By:

Signature of Registered Agent

Sue G. Knight
as its agent

7. 6800 Broken Sound Parkway

(Principal office address)

Boca Raton, Florida 33487

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

9. _____
(Mailing address)

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

Blackbeard Capital Management
Holdings LLC

(Name)

M/0000004885

6800 Broken Sound Parkway

(Street Address)

Boca Raton, Florida 33487

6800 Broken Sound Parkway

(Mailing Address)

Boca Raton, Florida 33487

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

_____ (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 21 day of October, 20 10.

Signature of a general partner:



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

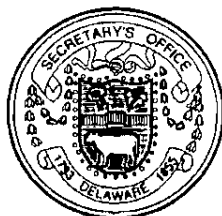
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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLACKBEARD CAPITAL MANAGEMENT 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-SECOND DAY OF OCTOBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLACKBEARD CAPITAL MANAGEMENT LP" WAS FORMED ON THE NINTH DAY OF SEPTEMBER, A.D. 2010.

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



4868657 8300

101020233

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8305677

DATE: 10-22-10