# B11000000/25

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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SECRETARY SINIE

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: HPC US Fund 1, LP	
Name of Foreign Limited Partn	ership or Limited Liability Limited Partnership
The enclosed application, certificate of status and fee partnership to transact business in Florida. Please return all correspondence concerning this mat	es are submitted to register a foreign limited partnership or limited liability limited ter to:
Elda Miranda	
Contact Person	<del></del>
Blackport Investment Group, LLC	
Firm/Company	
901 SE 17th Street, Suite 206	
Address	
Ft. Lauderdale, FL 33316	
City, State and Zip Code	
elda.miranda@blackport.com	
E-mail address: (to be used for future annual report	t notification)
For further information concerning this matter, pleas	e call:
Elda Miranda	<sub>at (</sub> 954 <sub>) 767-2121</sub>
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)  \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 7, 2011

ELDA MIRANDA 901 SE 17TH STREET, SUITE 206 FT. LAUDERDALE, FL 33316

SUBJECT: HPC US FUND 1, L.P. Ref. Number: W11000031035

We have received your document for HPC US FUND 1, L.P. and your check(s) totaling \$1008.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 111A00013916

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

1. HPC US Fund 1, L.P.	
(Name of Limited Partnership or Limited Liability I Acceptable Limited Partnership suffixes: Limited Partnership, I Acceptable Limited Liability Limited Partnership suffixes: Limit	Limited, L.P., LP, or Ltd.
	or limited liability limited partnership proposes to register to transact ust contain acceptable suffix.
2. New York	3. 1/5/2006
State or Country of Formation	Date of Formation
4. Name of Registered Agent for Service of Process and Flori	ida Street Address:
Dale Wood	
901 SE 17th Street, #206	
Ft. Lauderdale, FL_33316	
	te to act in this capacity. I further agree to comply with the provision of the complex of the complex and I am familiar with and accept the obligations of
Signature of	Registered Agent
7. Principle Office: (Florida Street Address) 8.	Mailing Address:
901 S.E. 17th Street, Suite 206	الالالالالالالالالالالالالالالالالالال
Ft. Lauderdale, FL 33316	Ft. Lauderdale, FL 33316
·	<b>S</b>
9. If limited partnership is a limited liability limited partners	ship, check box
10. Name, principal office address, and mailing address of ea	ach general partner:
Name of General Partner: Blackport Investment Group, LLC	Name of General Partner:
Street Address: 901 S.E. 17th Street, Suite 206	Street Address:
Ft. Lauderdale, FL 33316	
Mailing Address:	Mailing Address:
Name of General Partner:	Name of General Partner:
	Street Address:
Mailing Address:	Mailing Address:

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing 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 d	ate this document is filed by the Florida Department of State.)
12. Attached is a certificate of existence duly authenticated, not mo Florida Department of State, by the Secretary of State or other office the law of which it is organized.	
Signed this 25 day of May Signature of	a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

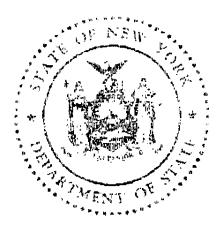
Certificate of Status (optional):

\$8.75

Page 2 of 2

## State of New York Department of State } ss:

I hereby certify, that HPC US FUND 1, L.P. a New York Limited Partnership, filed a Certificate of Limited Partnership pursuant to the Partnership Law, on 01/05/2006, and that the Limited Partnership is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 10th day of May two thousand and eleven.

First Deputy Secretary of State