

Division of Corporations

Page 1 of 1

# B13000000057

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H13000045813 3)))



H130000458133ABCZ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : NRAI SERVICES, LLC  
Account Number : I20080000104  
Phone : (302) 674-4089  
Fax Number : (302) 674-5266

**\*\*Enter the email address for this business entity to be used for the annual report mailings. Enter only one email address please.\*\***

Email Address: mleavitt@drydenfund.com

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 FEB 27 AM 8:52

FILED

RECEIVED  
13 FEB 27 AM 10:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LP/LLLP**  
**Dryden Capital Fund, LP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

J. SAULSBERRY  
EXAMINER

FEB 28 2013

Electronic Filing Menu

Corporate Filing Menu

Help

H13000045813 3

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

**1. Dryden Capital Fund, 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. February 4, 2013**

Date of Formation

**4. Name of Registered Agent for Service of Process and Florida Street Address:**

NRAI Services, Inc.

515 East Park Avenue

Tallahassee, FL

32301

5. 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. NRAI Services, Inc.

By:

Signature of Registered Agent

**7. Principle Office: (Florida Street Address)**

777 Brickell Avenue, Suite 1200

Miami, FL 33131

**8. Mailing Address:**

777 Brickell Avenue, Suite 1200

Miami, FL 33131

**9. If limited partnership is a limited liability limited partnership, check box ☐****10. Name, principal office address, and mailing address of each general partner:**Name of General Partner: Dryden Capital GP, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 777 Brickell Avenue, Suite 1200

Street Address: \_\_\_\_\_

Miami, FL 33131

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 FEB 27 AM 8:52

FILED

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 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 26 day of February, 20 13.

  
\_\_\_\_\_  
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

FILED  
2013 FEB 27 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H13000045813 3

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DRYDEN CAPITAL FUND, 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 FOURTH DAY OF FEBRUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DRYDEN CAPITAL FUND, LP" WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2013.

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

2013 FEB 27 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

5284151 8300

130125076

You may verify this certificate online  
at [corp.delaware.gov/aushbver.shtml](http://corp.delaware.gov/aushbver.shtml)



Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0191454

DATE: 02-04-13

H13000045813 3