

B13000000223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

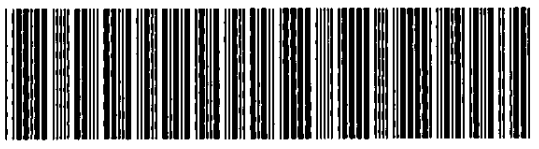
(Business Entity Name)

(Document Number)

Certified Copies Certificates of Status

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DIVISION OF CORPORATIONS
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SECRETARY OF STATE
FALL AID OFFICE

J. SAULSBERRY
EXAMINER

JUL 30 2013

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 7/29/13

NAME: TAURUS SPRING HILL FLORIDA LP

TYPE OF FILING: APPLICATION

COST: 1,061.25

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

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TALLAHASSEE FLORIDA

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ACCOUNT: *[Signature]* ~~FD/00000015~~

AUTHORIZATION: *[Signature]* ABBIE/PAUL HODGE

* File Second *

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Taurus Spring Hill Florida LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Douglas F. MacLean

Contact Person

Armor Compliance

Firm/Company

22 Batterymarch Street

Address

Boston, MA 02109

City, State and Zip Code

dmaclean@armorcompliance.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas F. MacLean

Name of Contact Person

at (617) 350-5250

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
- \$1,061.25 Filing Fee, Certified Copy, and 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

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 DEPT. OF STATE
 TALLAHASSEE, FLORIDA

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

1. Taurus Spring Hill Florida 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

3. July 18, 2013

State or Country of Formation

Date of Formation

4. Federal Employer Identification Number: 46-3244055

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

NRAI Services, Inc.

1200 South Pine Island Road

Plantation, FL 33324

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.

Signature of Registered Agent Brian Smith, Asst. Secretary

7. Principal Office:

c/o Taurus Investment Holdings, LLC

22 Batterymarch Street

Boston, MA 02109

8. Mailing Address:

c/o Taurus Investment Holdings, LLC

22 Batterymarch Street

Boston, MA 02109

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: Taurus Spring Hill Florida GP LLC

Name of General Partner: M13000004735

Street Address: 22 Batterymarch Street

Street Address: _____

Boston, MA 02109

Mailing Address: 22 Batterymarch Street

Mailing Address: _____

Boston, MA 02109

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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STATE
TALLAHASSEE FLORIDA

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Page 1 of 2

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 24th day of July, 2013.

Douglas J. Marzani AUTHORIZED PERSON
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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAURUS SPRING HILL FLORIDA 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-NINTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAURUS SPRING HILL FLORIDA LP" WAS FORMED ON THE EIGHTEENTH DAY OF JULY, A.D. 2013.

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

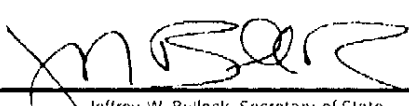
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TALLAHASSEE, FLORIDA



5369918 8300

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0622127

DATE: 07-29-13