

Florida Department of State
Division of Corporations
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Sun Capital Advisors VI, L.P.

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J. Shivers AUG 26 2013



August 21, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT

SUBJECT: SUN CAPITAL ADVISORS VI, L.P.
REF: W13000046419

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H13000185255
Letter Number: 213A00019910

RE-SUBMIT
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date of submission 8/20

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

Sun Capital Advisors VI, L.P.

1. _____
(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 LLP.

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. Cayman Islands 3. May 3, 2012
State or Country of Formation Date of Formation

4. Federal Employer Identification Number 98-1068465

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

C T Corporation System

1200 South Pine Island Road

Plantation, Florida 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.

By: CT Corporation System Angel Shearer Assistant Secretary
Signature of Registered Agent

7. Principal Office:

5200 Town Center Circle, Suite 600

Boca Raton, FL 33486

8. Mailing Address:

5200 Town Center Circle, Suite 600

Boca Raton, FL 33486

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: Sun Capital Partners VI Limited Liability Company Name of General Partner: _____

Street Address: 5200 Town Center Circle, Suite 600
Boca Raton, FL 33486

Street Address: _____

Mailing Address: _____

Mailing Address: _____

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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: April 6, 2013
(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 15th day of August, 2013

By: Sun Capital Partners VI, Ltd., the General Partner of Sun Capital Advisors VI, L.P.

Michael J. McConvery
Signature of a general partner

By: Michael J. McConvery, Vice President and Assistant Secretary

The individual signing this document affirms 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.817.153, 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

MC-61023

Certificate of Good Standing of a Partnership

TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

Sun Capital Advisors VI, L.P.

a partnership duly organized and existing under and by virtue of the Laws of The Cayman Islands is at the date of this certificate in Good Standing with this office, and duly authorized to exercise therein all the powers vested in the partnership.



Given under my hand and Seal at George Town in the
Island of Grand Cayman this 25th day of July
2013.
[Signature]
An Authorized Officer
Registrar of Partnerships
Cayman Islands.