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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.

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCAC000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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

Email Address: _____

FLORIDA/FOREIGN LP/LLLP
SUN CAPITAL SECURITIES MANAGEMENT, LP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

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Electronic Filing Menu Corporate Filing Menu

1. Bureau
JAN 06 2014

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

1. Sun Capital Securities 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. Cayman Islands

3. 06/28/2013

State or Country of Formation

Date of Formation

4. Federal Employer Identification Number: 98-1119953

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.

C T Corporation System

By: Connie Blue

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 Securities, LLC

Name of General Partner: _____

Street Address: 5200 Town Center Circle, Suite 600

Street Address: _____

Boca Raton, FL 33486

Mailing Address: 5200 Town Center Circle, Suite 600

Mailing Address: _____

Boca Raton, FL 33486

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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TALLAHASSEE, FLORIDA

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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 31st day of December, 2013



Signature of a general partner
Mark Hajduch, Vice President and Asst.

Secretary of Sun Capital Securities, LLC

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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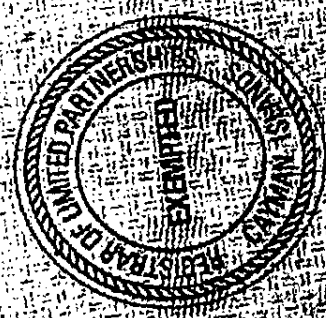
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Registration of Exempted Limited Partnership

I, **D. EVADNE FRANKS** Assistant Registrar of Exempted Limited Partnership in the Cayman Islands, DO HEREBY CERTIFY, pursuant to the Exempted Limited Partnership Law, 1991 that all the requirements of the said Law in respect of registration were complied with by

Sun Capital Securities Management, LP
on the 28th day of June Two Thousand Thirteen

Given under my hand and Seal at George Town in the Island of Grand Cayman this 28th day of June Two Thousand Thirteen



[Signature]
Assistant Registrar of Exempted Limited Partnership
Cayman Islands