## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone: (850)222-1092 Fax Number: (850)878-5368

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

Email Address:

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# FLORIDA/FOREIGN LP/LLLP TAH Holding LP

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Corporate Filing Menu

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#### **COVER LETTER**

TO: Registration Section Division of Corporat				,	
SUBJECT: TAH Holding LI	P				
	Foreign Limited Partne	ership or Limited Liability	Limited Partnership		
The enclosed application, cert partnership to transact busines Please return all corresponden	ss in Florida.		r a foreign timited partnership o	r limited liab	ility limited
Emily Moniz					
C	Contact Person	······································			
CT Corporation				#1 11 14.	201
Fi	irm/Company	······································			
155 Federal Street Suite 700					2014 . EV.
	Address				21
Boston MA 02110				ല്ല് സംപ	7*
City, S	state and Zip Code			74	
E-mail address: (to be used to	for future annual report	notification)			: 50
For further information concer	rning this matter, please	call:		••	
Emily Moniz	,,	at (617 ) 531 5	827		
Name of Contact Per	rson		ime Telephone Number		
Enclosed is a check for the fol	Bowing amount:				
(\$965 Filing Fee and and	\$1,008.75 Filing Fees d Certificate of atus	□ \$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			

10 Apr - 13/11/2015 Highway Warmer Claims

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

L TAH HOLDING	LP		
- Acceptable Limited	Partnership suffixes: Limited Parinership	y Limited Parinership, which must include suffix) , Limited, L.P., EP, or Ltd. nited Liability Limited Partnership, L.L.L.P. or LLL	
If name unavailab	le, name under which the limited purtnershi business in Florida; ;	ip or limited liability limited partnership proposes to must contain acceptable suffix.	register to transact
2. Delaware	·	3 JULY 1, 2014	
8	tate or Country of Formation	Date of Formation	
4. Federal Employ	er Identification Number: 47-1286254		
	red Agent for Service of Process and Flo	rida Street Address:	2014
1200 South Pine Isl	and Road		
Plantation, FL 3332	14		202
6. I hereby accept to of all statutes rel my position as reg	ative to the proper and complete performations and complete performance of the state of the stat	ree to act in this capacity. I further agree to complying of my duties, and I am familiar with and accept to P P P P P P P P P P P P P P P P P P	with the provisions the obligations of
7. Principal Office:		8. Mailing Address:	
c/o TRICON CAPIT	2'0 TRICON CAPITAL 2'0 TRICON CAPITAL		
1067 YONGE STRI	BET	1067 YONGE STREET	<del>-</del>
TORONTO, ONTA	RIO M4W 2L2	TORONTO, ONTARIO M4W 2L2	
9. If limited partne	rship is a limited liability limited partue	rship, check box .	
10. Name, principa	l office address, and malling address of	each general partner:	
Name of General	Partners TAH HOLDING GP LLC	Name of General Partner:	
Street Address:	C/O TRICON CAPITAL, 1067 YONGE		
	TORONTO, ONTARIO M4W 2L2	34 341 FRBB 3431	
Mailing Address	<u> </u>	Mailing Address:	
Name of General	Partner:	Name of General Partner:	
Street Address:	-		
Mailing Address		Mailing Address:	

Name of General Partner:	Page 1 of 2 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 da	tys after the date this document is filed by the Florida Department of State.)
	eated, not more than 90 days prior to the delivery of this application to the or other official having custody of the entity's records in the jurisdiction inder
Signed this day of	20 14
	Signature of a general partner
The individual signing this document affirm that the fo	nots stated herein are true and the individual is aware that false information on stitutes a third degree felony as provided for in s.817.155, F.S.
Filing Fors: Cortified Copy (optional): Cortificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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# Delaware

PAGE

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TAH HOLDING 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 EIGHTEENTH DAY OF JULY, A.D. 2014.

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

5556156 8300

140973416

You may vorify this cortificate onlin

Jeffrey W. Buflock, Sucretary of State

DATE: 07-18-14