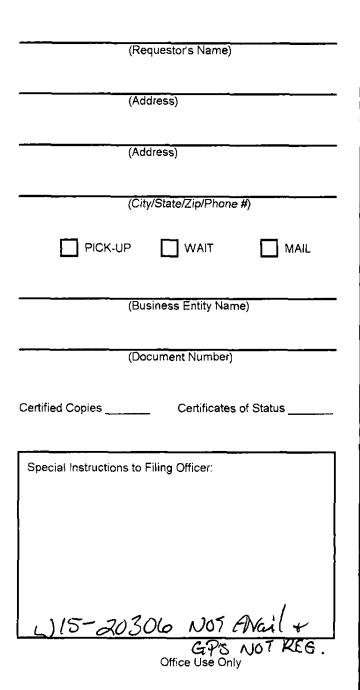
*B15000000093





600269831346

TO ADEROXE BOSE

DEPARTMENT OF STATE

DISHAR 23 AH IO:

K. SALY EXAMINER APR 2 4 2015 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: 12000000195			
REFERENCE	: (549742) 4806334			
AUTHORIZATION	Spellelena			
COST LIMIT	: \$ 1,000.00			
ORDER DATE : March 16, 2015				
ORDER TIME : 9:33 AM				
ORDER NO. : 549742-115				
CUSTOMER NO: 4806334				
	·			
FOREIGN FILINGS				
NAME: SOLSTICE INVESTMENTS LP				
XXXX QUALIFICATION (TYPE: LP)				
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	ANDING			

EXAMINER:

CONTACT PERSON: Courtney Williams -- EXT# 62935



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2015

CSC / COURTNEY WILLIAMS

RESUBMIT

Please give original submission date as file date.

SUBJECT: SOLSTICE INVESTMENTS LP

Ref. Number: W15000020306

We have received your document for SOLSTICE INVESTMENTS LP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

* The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L02000026006 "SOLSTICE INVESTMENTS, LLC".

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly Regulatory Specialist II

Letter Number: 415A00005813

€OVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Solstice Inve	estments LP	and to grow principle, it is the second to	
	e of Foreign Limited Partn	ership or Limited Lie	ability Limited Partnership
partnership to transact but			egister a foreign limited partnership or limited liability limited
Andrea Duncliffe			
	Contact Person		
McDermott Will & Emer	y LLP		
	Firm/Company		
340 Madison Avneue			
	Address		
New York, NY 10173			
Ci	ty. State and Zip Code		
thomas.finlan@credit-su			
E-mail address: (to be u	sed for future annual repor	(notification)	
For further information co	oncerning this matter, pleas	e call:	
Tom Finlan		at (212	325 5832
Name of Contac	t Person		d Daytime Telephone Number
Enclosed is a check for th	e 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 and Certified Copy	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, Fl. 32301	ircle	MAILING ADDR Registration Section Division of Corpor P. O. Box 6327 Tallahassec, FL 32	on rations

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

FILED
2016 HAR 23 AH 10: 08
SLLAN ANT THE CO.

	NSACT BUSINESS IN FLORIDA
Acceptable Limited Partnership suffixes: Limited Par	Liability Limited Partnership, which must include suffix)
	artnership or limited liability limited partnership proposes to register to transact florida; must contain acceptable suffix.
2 Cayman Islands	3. 11/06/2014
State or Country of Formation 4. Federal Employer Identification Number: 98-1	Date of Formation 222928
5. Name of Registered Agent for Service of Process Corporation Service Company	and Florida Street Address:
1201 Hays Street	
Tallahassee, Florida 32301	
By: Si 7. Principal Office: c/o Solar Investco LLC	8. Mailing Address: c/o Solar Investoo LLC
11 Madison Avenue	11 Madison Avenue
New York, NY 10010	New York, NY 10010, ATTN: Tom Finlan
9. If limited partnership is a limited liability limite 10. Name, principal office address, and mailing ad Name of General Partner: Solar Investco LLC	
Street Address: 11 Madison Avenue, NY, NY 1	
Mailing Address: 11 Madison Avenue, NY, NY 1	Mailing Address: 90 South 7th Street, Minneapolis, MN 55402
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:

	FILED			
Name of General Partner:	age 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 m Florida Department of State, by the Secretary of State or other off the law of which it is organized.	ore than 90 days prior to the delivery of this application to the icial having custody of the entity's records in the jurisdiction under			
Signed this day of	7			
	in his capacity as Director of Solar Investco LLC			
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.				
Certified Copy (optional): \$55	,000.00 (\$965 Filing Fee and \$35 Registered Agent Fec) 2.50 .75			
Page 2 of 2				

MC-79784

Certificate of Good Standing of a Partnership

TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

Solstice Investments LP

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 10th day of March Two Thousand Fifteen

An Authorised Officer Registrar of Partnership Cayman Islands.

> Authorisation Code , 430460614562 www.venfy.gov.ky 10 March 2015