11/18/2016

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet Resubmission, please have filed after submission H160002866803.

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n, please have filed after submission H160002866



(((H16000285264 3)))

803.

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To:

Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

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FLORIDA/FOREIGN LP/LLLP KIG INVESTMENT PARTNERSHIP, L.P.

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Estimated Charge	\$1,000.00

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Corporate Filing Menu

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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	KIG Investment Partnership, L.P.			
	e of Foreign Limited Partn	crship or Limited Liab	ility Limited Partnership	
partnership to transact bu		.	ster a foreign limited partnership or limited liability limited	
	Michael L. Cifelli			
1.77.00.00.00.00.00.00.00.00.00.00.00.00.	Contact Person			
•	c/o Foley Hoag LLP			
Pirm/Company				
155 Seaport Boulevard				
Address				
Boston, MA 02210				
City, State and Zip Code		***************************************		
n	uatias@kigip.com			
E-mail address: (to be u	sed for future annual repor	t notification)		
For further information of	oncerning this matter, pleas	e call:		
Michael L. Cifelli		_at (32-1766	
Name of Contact Person		Area Code and Daytime Telephone Number		
Enclosed is a check for th	e following amount:			
8 \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	O\$1,008.75 Filing Fees and Certificate of Status	© \$1,052.50 Filing F and Certified Copy	ces \$\text{\$1,061.25 Fiting Fee,} \\ Certified Copy, and \\ Certificate of Status	
Registration Section Division of Corporations Clifton Building		MAILING ADDRE Registration Section Division of Corporal P. O. Box 6327 Tallahassee, PL 323	ions	

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

1. RIG investment Partnership, L.P. (Name of Limited Partnership or Limited Liability Lin Acceptable Limited Partnership suffixes: Limited Partnership, Lin Acceptable Limited Liability Limited Partnership suffixes: Limited	nited, L.P., LP.	or Ltd.	-	
If name unavailable, name under which the limited partnership or business in Florida; must			egister to t	transaci
2. Delaware	3.	December 21, 2012		
State or Country of Formation	J	Date of Formation	-	
4. Federal Employer Identification Number: 46-1649904		·		
5. Name of Registered Agent for Service of Process and Florida	a Street Addre	55 ;		
Matins Sacerdote				
175 SW 7th Street, Suite 1210				
Miami, FL 33130				
6. I hereby accept the appointment as registered agent and agree of all statutes relative to the proper and complete performance my position as registered agent. By: By:	of my dulles, as	nd I am famillar with and accept th	vith the pr e obligation	rovisions ons of
Signature of R	legistered Agei	nt		
	dalling Addres	151		
175 SW 7th Street, Suits 1210 175	S SW 7th Street	, Suite 1210		
Miami, FL 33130 Mi	nmi, FL 33130	3.5. 2.5. (2.		
			- E	ming to
9. If limited partnership is a limited liability limited partnersh	ip, check box .	二 三		j.
10. Name, principal office address, and mailing address of each	h general parti	ner:	ورياده هجيو	
YIC CD LLC		neral Partner:	•-	T
75 State Street, 21st Fir., Boston, MA 02109	_ Name of Ge	neral Partner:	>	
Street Address:	_ Street Addre	···	\sim	
	<u>.</u>	ROE	س	
Mailing Address: 75 State Street, 21st Flr., Boston, MA 02109	Mailing Ado	lress;		
	-	, N. S.		
Name of General Partner:	— Name of Ge	neral Partner:		
Street Address:	Street Addre	158:		
Mailing Address:	Malling Add	iress:		

To: Page 6 of 8

Name of General Partners	Page 1 of 2 Name of General Purtner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date (Effective date cannot be prior to nor mor	of filing: than 90 days after the date this document is filed by the Florida Department of State.) If authenticated, not more than 90 days prior to the delivery of this application to the try 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 day o	f October 20 16
The individual signing this document affile	Signature of a general partner Matias Sacerdote, Manager of KIG OP, LLC In that the facts stated herein are true and the individual is aware that false information I of State constitutes a third degree felony as provided for in s.817.155, F.S.
Filing Fees: Certified Copy (option Certificate of Status (o	· · · · · · · · · · · · · · · · · · ·

Page 2 of 2

FILED



Page 1

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

DELAWARE, DO HEREBY CERTIFY "KIG INVESTMENT PARTNERSHIP, L.P." 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 NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5264629 8300

SR# 20166698195

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

Authentication: 203361522

Date: 11-18-16

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2016-11-21 10:54:08 CST

12122023573 From: Kimberly Laughrey

850-617-6381

11/21/2016 9:58:47 AM PAGE 1/001 Fax Server



November 21, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: KIG INVESTMENT PARTNERSHIP, L.P.

REF: W16000078213

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.

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.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H16000285264 Letter Number: 116A00024882

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MALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314