

B17000000257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2017 OCT 23 PM 4:07

OCT 23 2017
J. HARRIS

608-411M

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Merion Investment Management LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

Patrick Horsman

Contact Person

Merion Investment Management LP

Firm/Company

1111 Kane Concourse, Suite 603

Address

Bay Harbor Islands, FL 33154

City, State and Zip Code

PH@MerionCap.com; TJ@MerionCap.com;

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tara Jauregui

at (305) 433-1204

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the 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 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2017

PATRICK HORSMAN
1111 KANE CONCOURSE, SUITE 603
BAY HARBOR ISLANDS, FL 33154

SUBJECT: MERION INVESTMENT MANAGEMENT LP
Ref. Number: W17000080973

We have received your document for MERION INVESTMENT MANAGEMENT LP and your check(s) totaling \$1000.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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

Letter Number: 917A00020553

2017 OCT 23 PM 4:00
Filing Office

2017 OCT 23 PM 4:07

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

1. Merion Investment 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. Delaware

State or Country of Formation

3. January 26, 2010

Date of Formation

4. Federal Employer Identification Number: 27-1799462

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

Patrick Horsman

9400 W Bay Harbor Drive #204

Bay Harbor Islands, FL 33154

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.

Signature of Registered Agent

7. Principal Office:

1111 Kane Concourse

Suite 603

Bay Harbor Islands, FL 33154

8. Mailing Address:

1111 Kane Concourse

Suite 603

Bay Harbor Islands, FL 33154

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: Patrick Horsman

Street Address: 9400 W Bay Harbor Drive #204

Bay Harbor Islands, FL 33154

Mailing Address: 9400 W Bay Harbor Drive #204

Bay Harbor Islands, FL 33154

Name of General Partner: Sam Johnson

Street Address: 325 W 86th Street, Apt 7A

New York, NY 10024

Mailing Address: 325 W 86th Street, Apt 7A

New York, NY 10024

Name of General Partner: Andrew Barroway

Street Address: 20914 N 104th Street

Scottsdale, AZ 85255

Mailing Address: 20914 N 104th Street

Scottsdale, AZ 85255

Name of General Partner: Dana Stewardson

Street Address: 129 Little Club Road

Gulf Stream, FL 33483

Mailing Address: 129 Little Club Road

Gulf Stream, FL 33483

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: **Filing Date** _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 twenty-sixth day of September, 2017

Signature of a general partner

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.817.155, 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

2017 OCT 23 PM 4:07

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MERION INVESTMENT MANAGEMENT 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 NINETEENTH DAY OF OCTOBER, A.D. 2017.



Jeffrey W. Bullock, Secretary of State

4781587 8300

SR# 20176700349

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

Authentication: 203427675

Date: 10-19-17