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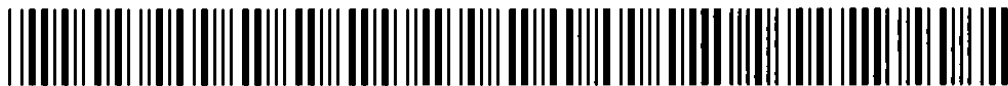
Florida Department of State

Division of Corporations

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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SECRETARY OF STATE
MAIL ADDRESS PLATFORM

2019 JUN -6 AM 11:25

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

Sun Capital Partners Group VII, Ltd.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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JUN 20 2019

M. SOLOMON



June 11, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: SUN CAPITAL PARTNERS GROUP VII, LTD.
REF: W19000055760

We have received your document for SUN CAPITAL PARTNERS GROUP VII, LTD. .
However, the enclosed document has not been filed and is being returned to
you for the following reason(s):

Please type the name of the company with suffix, corporation, corp,
company, etc on the second line as the alternate name.,

If you have any questions concerning the filing of your document, please
call (850) 245-6052.

Mel Solomon FAX Aud. #: H19000180694
Regulatory Specialist II Supervisor Letter Number: 619A00011712

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Sun Capital Partners Group VII, Ltd. Company
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co., Ltd." or "Corp., Ltd.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Cayman Islands 3. 98-1493123
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 3, 2019 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon registration.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5200 Town Center Circle, 4th Floor, Boca Raton, FL 33486
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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

B₂: _____
(Registered agent's signature)
Candice Pignataro, Assistant Secretary

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

SECRETARY OF STATE
WASHINGTON, D. C. 20520

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Melissa Klafter

Address: 5200 Town Center Circle, 4th Floor, Boca Raton, FL 33486

Director: Melanie Papatestas

Address: 5200 Town Center Circle, 4th Floor, Boca Raton, FL 33486

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

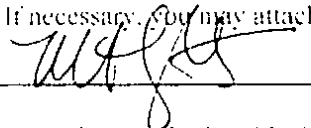
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she 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.

13. Melissa Klafter, Director

(Typed or printed name and capacity of person signing application)

2019 JUN -6 AM 11:25
CLERK OF STATE
TALLAHASSEE, FLORIDA

MC-350978

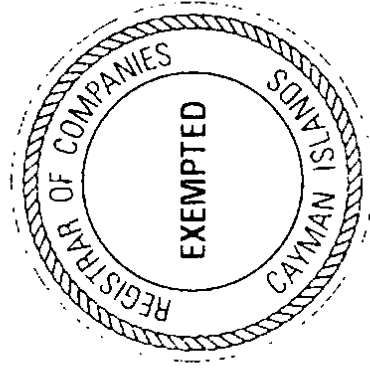
Certificate Of Good Standing

TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

Sun Capital Partners Group VII, Ltd.

a company duly organised and existing under and by virtue of the Laws of The Cayman Islands is at the date of this certificate in Good Standing with the office, and duly authorised to exercise therein all the powers vested in the company.



Given under my hand and Seal at George Town in the Island of Grand Cayman this 5th day of June Two Thousand Nineteen

A handwritten signature in dark ink, appearing to be "S. Smith", written over a horizontal line.

**An Authorised Officer,
Registry of Companies,
Cayman Islands.**