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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETAR TO THE STATE ST



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 7, 2008

ADAM HERMAN 123 EAST MAIN STREET, FIFTH FLOOR CHARLOTTESVILLE, VA 22902

SUBJECT: HARREN EQUITY PARTNERS, LLC

Ref. Number: W08000022959

We have received your document for HARREN EQUITY PARTNERS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must contain the names and street addresses of the members of the limited liability company.

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) 245-6020.

Tammi Cline Regulatory Specialist II 2010 MAY 15 PM 3: 24

Letter Number: 908A00029290

COVER LETTER

SURIFCT	Harren Equity Partners, LLC			
SOBSECT		Limited Liability Company)		
Florida," C		d Liability Company for Authorization to Transacture submitted to register the above referenced fored		
Please retur	rn all correspondence concerning the	his matter to the following:		
	Adam S. Herman			
		(Name of Person)	_	
	Harren Equity Partners, LLC		•	
		(Firm/Company)		
	123 East Main Street, Fifth Floor			
		(Address)	2008 HAY	
	Charlottesville, VA 22902	AH	MAY WEST	AST COMME
	·	ty/State and Zip Code)	15	Examination of the second of t
For further	information concerning this matter	r, please call:	PH 3:	
Ada	m S. Herman	at (614) 332-2398	: 24	
	(Name of Person)	(Area Code & Daytime Telephone Nun	iber)	
Divi P.O	ILING ADDRESS: ision of Corporations . Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following amount: 125.00 Filing Fee \$\int\\$130.00 Filing Fe Certification	ee & 🔲 \$155.00 Filing Fee & 🗵 \$160.00 Filing Fee	, Certificat & Certified	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	rpose of transacting business in Florida and attach a copy of the writ alternate name. The alternate name must include "Limited Liability
Delaware	3. 20-5837879
Jurisdiction under the law of which foreign limited liability company is organized)	y (FEI number, if applicable)
10/4/06	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
N/A	
(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.) F.S. to determine penalty liability)
123 East Main Street, Fifth Floor	
Charlottesville, VA 22902	ess of Principal Office) ARE
(Street Addre	ess of Principal Office)
If limited liability company is a manager-manager	ed company, effect field [2]
The name and usual business addresses of the m	anaging members or managers are as follows:
123 East Main Street, Fifth Floor, Charlottesville, VA 22	O=
350 East Las Olas Boulevard, Suite 980, Fort Lauderdale	FL 33301 Brian D. Schwartz
Attached is an original certificate of existence, no more than 9	90 days old, duly authenticated by the official having custody of records copy is not acceptable. If the certificate is in a foreign language, a
jurisdiction under the law of which it is organized. (A photoc slation of the certificate under oath of the translator must be s	uomiusa.)

Typed or printed name of signee

Thomas A. Carver

1, , 1

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name of Harren Equity Parti	the Limited Liability Com	рапу is:			
If name unavaila	able, the alternate name to	be used in the state	of Florida is:		
2. The name and	d the Florida street address	of the registered ag	gent and office are:		
	NRAI Services, Inc.				
		(Name)		1 m =	
	2731 Executive Park Drive, Suite 4			CRET LAHA	~13
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)			SEA 2	A Section
<u>-</u>	Weston,	FL	33331	PH OF S E. FL	Taurand T E T
	•	City/State/Zip		PH 3: 24 OF STATE E. FLORIDA	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

National Registered Agents, Inc.

MIL (Signature), ASST. SEC

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PACE '

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HARREN EQUITY PARTNERS, LLC" 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 FIFTH DAY OF MAY, A.D. 2008.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HARREN EQUITY PARTNERS, LLC" WAS FORMED ON THE FOURTH DAY OF OCTOBER, A.D. 2006.

4230552 8300

080503563

AUTHENTICATION: 6567920

DATE: 05-05-08

Harriet Smith Windsor, Secretary of State

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