# M0900000488

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE
FALLAHASSEE, FLORID

D. BRUCE

FEB 6 2009

**EXAMINER** 

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

Ormick Ec

SUBJECT: McCormick Equity Partner	rs	
	mited Liability Company)	<del></del>
The enclosed "Application by Foreign Limited L Florida," Certificate of Existence, and check are liability company to transact business in Florida	submitted to register the above refere	
Please return all correspondence concerning this	matter to the following:	
Christopher T. McCormic		
(N	Name of Person)	
CTM Capital Managemen	nt, LLC	
(F	Firm/Company)	
8720 Bay Colony Dr. #30		09F
	(Address)	ANAS ANAS ANAS ANAS ANAS ANAS ANAS ANAS
Naples, FL 34108		FILED EB-6 MID: 23 ETARY OF STATE HASSEE. FLORIDA
, •	State and Zip Code)	D: 2.
For further information concerning this matter, p	lease call:	<b>Α ω</b>
Christopher T. McCormick	at (248) 789-9790	
(Name of Person)	(Area Code & Daytime Telep	hone Number)
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\begin{align*}	_	Filing Fee, Certificate of Status & Certified Copy

February 5, 2009

Deborah Bruce Regulatory Specialist Florida Department of State Division of Corporations

Dear Ms. Bruce

Per your attached correspondence, I have enclosed a Certificate of Good Standing for McCormick Equity Partners, LLC from the Secretary of State of Delaware. If you should need any other information please feel free to call me at (248) 789-9790. Thank you for your assistance in this filing.

Best regards,

Christopher T. McCormick

FILED

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SECRETARY OF STATE
TALLAHASSEE, FI OBJE



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2009

CHRISTOPHER T. MCCORMICK CTM CAPITAL MANAGEMENT, LLC 8720 BAY COLONY DR. #302 NAPLES, FL 34108

SUBJECT: MCCORMICK EQUITY PARTNERS, LLC

Ref. Number: W09000003565

We have received your document for MCCORMICK EQUITY PARTNERS, LLC and your check(s) totaling \$160.00. 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 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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 509A00002515

# 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:

McCormick Equity Partners, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
Delaware 3. 26-4016836
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
5. Perpetual (Date of Organization)  [Date of Organization]  [Date of Organization]  [Duration: Year limited liability company will cease to exist or "perpetual")
). 
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
8720 Bay Colony Dr. #302
Naples, FL 34108
(Street Address of Principal Office)
3. If limited liability company is a manager-managed company, check here ✓
The name and usual business addresses of the managing members or managers are as follows:
Christopher T. McCormick
8720 Bay Colony Dr. #302
Naples, FL 34108
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)
1. Nature of business or purposes to be conducted or promoted in Florida: Investments in
publicly traded equities
Q T. MS
Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  Christopher T. McCormick

Typed or printed name of signee

# 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.

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	SECRETARY OF STATE TALLAHASSEE. 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.

(Signature)

The name of the 1 instead I inhille. Common in-

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "MCCORMICK EQUITY PARTNERS,

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND

IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN

CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2008, AT 10:24 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "MCCORMICK EQUITY PARTNERS,

LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MCCORMICK EQUITY PARTNERS, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
NOT BEEN ASSESSED TO DATE.

4639862 8310

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AUTHENT CATION: 7117470

DATE: 02-04-09

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