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N. CAUSSEAUX

MAR 2 5 2009

EXAMINER

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:

1. Compassion Fund of Clay, LLC (Name of Foreign Limited Liability Company; must include	de "Limited Liability Compa	iny," "L.L.C.," or "LI	.C.")
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C.," "LLC.")	e of transacting business in I nate name. The alternate name	Florida and attach a cone must include "Lim	opy of the written
2 Delaware	Not Applicable		
(Jurisdiction under the law of which foreign limited liability company is organized)		er, if applicable)	
	perpetual		
(Date of Organization)	(Duration: Year limited lexist or "perpetual")	liability company will	cease to
6. upon filing		t.,	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability	7) 百萬	99
7. 2979 PGA Blvd., Palm Beach Garden	s, FL 33410	로드 (MI) 기구 중국	慧 <u>T</u>
		が表	3 12
(Street Address of	of Principal Office)	77.0	E O
8. If limited liability company is a manager-managed	company, check here		ເລ 29
9. The name and usual business addresses of the mana	ging members or manag	gers are as follows	s:
The Compassion Fund, Inc.			
2979 PGA Blvd., Palm Beach Garden	s, FL 33410		
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under eath of the translator must be subm	is not acceptable. If the certifi		
11. Nature of business or purposes to be conducted or	promoted in Florida: <u>p</u>	rovide non-p	rofit
services			<u> </u>
- Sarde est Och	lane		
Signature of a member or an aut (In accordance with section 608.408(3), F.S.			

Typed or printed name of signee

Sandra L. Adams, Esq., VP and General Counsel

an affirmation under the penalties of perjury that the facts stated herein are true.)

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.

1. The name of	f the Limited Liability Con	npany is:			
Compassio	on Fund of Clay, LLC	<u> </u>	.,		
If name unavai	lable, the alternate name to	be used in the state of Florida is:			
2. The name an	nd the Florida street addres	ss of the registered agent and office are:	TALC:	09	
Registered Agent Solutions, Inc.				HAR 24	77
		(Name)		24	
155 Office Plaza Drive, Suite A				≅	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			一覧温): 29	
	Tallahassee	32301 FL	* ·		
		City/State/Zip			

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)

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

Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "COMPASSION FUND OF CLAY, 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 TWELFTH DAY OF MARCH, A.D. 2009.

99 WAR 24 M ID 29

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AUTHENTY CATION: 7183033

DATE: 03-12-09

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