

FROM :

Division of Corporations

FAX TO :

Jun. 19 2009 02:43:11 P1

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Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

ComVest FTI SAC, LLC

Certificate of Status	1
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EXAMINER

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FROM : _____

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Jun. 19 2009 04:43PM P2

**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. COMVEST FTI SAC, LLC

(Name of foreign limited liability company)

2. Delaware

(Jurisdiction under the law of which foreign limited
liability company is organized)

3. Applied For

(FEI number, if applicable)

4. June 18, 2009

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease
to exist or "perpetual")

6. Upon Acceptance

(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. c/o ComVest Capital LLC, One North Clematis Street, Suite 300

West Palm Beach, Florida 33401

(Street address of principle office)

8. If limited liability company is a manger-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

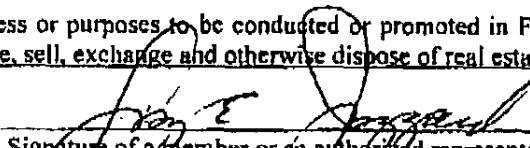
ComVest Capital LLC

One North Clematis Street, Suite 300

West Palm Beach, Florida 33401

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Acquire, hold, operate, manage, finance, develop, lease, sell, exchange and otherwise dispose of real estate located in Florida.


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.)

Gary Jaggard

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FAX NO. : _____

Jun. 19 2009 04:43PM P3

**CERTIFICATE OF DESIGNATION OF
REGISTER 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 Limited Liability Company is:

COMVEST FTI SAC, LLC

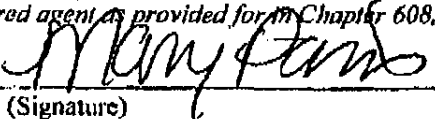
2. The name and the Florida street address of the registered agent and office are:

NRAI Services, Inc.
(Name)

2731 EXECUTIVE PARK DR. STE 4
Florida street address (P.O. Box NOT ACCEPTABLE)

WESTON FL 33331
(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, F.S.


(Signature)

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

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMVEST FTI SAC, 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 NINETEENTH DAY OF JUNE, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMVEST FTI SAC, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JUNE, A.D. 2009.

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

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TALLAHASSEE, FLORIDA

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AUTHENTICATION: 7372994

DATE: 06-19-09