Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001580543)))



H090001580543ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (85

: (850)617-6383

From:

Account Name : DRIVER, MCAFEE, PEEK & HAWTHORNE, P.L.

Account Number: 120020000137
Phone: (904)301-1269
Fax Number: (904)301-1279

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED

9 JUL -6 AM 6: 24
SECHETARY OF STATE

CRS-CFRP Holdings LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

T HAMPTON Corporate Filing Menu

Help

JUL - 7 2009

EXAMINER

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATULIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TH			! FOR!	5/G/V
•				
1. CRS-CFRF [Name of Foreign Limited Liability Company; must inc	clud	e "Limited Liability Company," "L.L.C.," or "LLC.")	 ,	
(If name unavailable, enter alternate name adopted for the pure consent of the managers or managing members adopting the all Company," "L.L.C," "LLC.")				
2. Delaware (Jurisdiction under the law of which foreign limited liability	3.	27-0470053 (FEI number, if applicable)		
(Jurisdiction under the law of which foreign limited liability company is organized)	7	(FEI number, if applicable)	_	
4, June 25, 2009	5.	Perpetual (Duration: Year limited liability company will cease		
(Date of Organization)		(Duration: Year limited liability company will cease exist or "perpetual")	to	
6. Upon acceptance			_	
(Date first transacted business in 1 (See sections 608.501 & 608.502 F.	Plori .S. te	ida, if prior to registration.) o determine penalty liability)		
7. c/o Eola Capital LLC, One Independent Drive, Suite 1850		<u></u>	. ¥S	
Jacksonville, FL 32202				SICRE
(Street Address	ss of	Principal Office)	9	유닭
8. If limited liability company is a manager-manage	ed c	ompany, check here 🗸	A	CORP
9. The name and usual business addresses of the ma	เกลย	ing members or managers are as follows:	Ö	STA OR AT
CRS-CFRP Capital LLC	~		5	STATE
o/o Eola Capital LLC, One Independent Driv	/e, \$	Suite 1850	_	
Jacksonville, Ft 32202			······································	
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under oath of the translator must be sull	ypy i	snot acceptable. If the certificate is in a foreign language,		sin
11. Nature of business or purposes to be conducted of	or p	romoted in Florida: All lawful business		
permitted under the laws of the Unit	led	States and of the State of Florida.	<u> </u>	
Signature of a member or an a	nth F.S.,	Orized representative of a member. the execution of this document constitutes		
•		1. Cox		
Typed or printe				

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 the L	imited Liability Company is:
	CRS-CFRP Holdings LLC
If unavailable, the alt	ernate to be used in the state of Florida is:
2. The name and the	Florida street address of the registered agent and office are:
	Henry F. Pratt, III (Name)
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Jacksonville, FL 32202 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 dutles, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

ire) (

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

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRS-CFRP HOLDINGS 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 TWENTY-FIFTH DAY OF JUNE, A.D. 2009.

TION: 7385480

DATE: 06-25-09