Division of Corporations 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.

(((H10000151148 3)))



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

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620 Phone : (608)827-5300

Fax Number : (608)827-5501

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

Foreign Limited Liability Company Persimmon Capital Partners, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

S. HAWKES

JUN 3 0 2010

EXAMINER

H100001511483

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUMMITTED TO REGISTER A FORFIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 Persimmon Capital Partners, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability," Company," "L.L.C.," "LLC.") 83-0475677 (FEI number, if applicable) 2 Maryland (Jurisdiction under the law of which foreign limited liability company is organized) Perpetual 4, 3/21/2007 (Duration: Year limited liability company will cease to (Date of Organization) (Date first transacted business in Borida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine ponalty liability) 7. 7506 Persimmon Tree Ln, Bethesda, Maryland 20817 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: William P. Angrick III, 7506 Persimmon Tree Ln, Bethesda, Maryland 20817 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: All lawful business MEMBER Signature of a member or any 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.) William P. Angrick III

Typed or printed name of signee

4100001211483

H100001511483

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 th	e Limited Liability	Compa	my is:			
Persimmon Capital	Partners, LLC					
If name unavailab	le, the alternate na	me to be	used in the stat	te of Florida is	:	JUN 29
2. The name and	the Florida street a	ddress o	of the registered	agent and offi	ce are:	
P	usiness Filings Incor	porated				
<u>.</u>	8		(Name)			The state of the s
<u> 1</u> 2	203 Governors Squar	e Blvd, S	Suite 101, ess (P.O. Box <u>NO</u>	T ACCEPTABLE)		
<u>T</u> 1	allahassee		FL City/State/Zip	32301-2960		
liability company of agent and agree to relating to the pro	d as registered age at the place designa act in this capacity per and complete pe position as registere	ted in th i. I furth erforman	ris certificate, I h per agree to comp ace of my duties,	ereby accept to ply with the pro and I am famil	he appointm ovisions of a liar with and	ent as registered all statutes d accept the
Maril						
	(Signature) '.P., Business Filings	Incorpor	rated			
,	S.	100.00	Fiting Fee for Designation of Certified Cop	of Registered A	Agent	

\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT PERSIMMON CAPITAL PARTNERS, LLC, FORMED MARCH 21, 2007, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JUNE 14, 2010.

Paul B. Anderson Charter Division M JUN 29 AH 10: 01



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

crblnk

R6424762