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.

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIAD PROFBSSIONAL SERVICES, LLC

Account Number : I2002000094

Phone : (770)777-2091

Fax Number

: (770)220-1943

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 WRM IX GP, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	. 04
Estimated Charge	\$155.00

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NOV - 3 2010

EXAMINER

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: WRM IX GP, L.L.C. Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Flor Existence, and check are submitted to register the above referenced foreign limited liability company to transact		
Please return all correspondence concerning this matter to the following:		
Kashif Z. Sheikh	_	
Name of Person		
Westbrook Pertners	≅ōn	2
Firm/Company		Æ
c/o Westbrook Partners, 645 Madison Ave, 18th Fi	22.50 22.50	2¥ € HOV -2
Addross		-2
New York, New York, 10022		JPO III
City/State and Zip Code	—————————————————————————————————————	数
sgavilano@westbrookpartners.com E-mail address: (to be used for future annual report notification)	17	ယ ဇာ
For further information concerning this matter, please call;		
Kashif Z, Sheikh ut (212) 849-8800 Name of Person Area Code & Daytime Telephone Number		
Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Registration Section P.O. Box 6327 STREET ADDRESS: Division of Corporations Registration Section Clifton Building		
Tallahassee, Ft. 32314 2661 Executive Center Circle Tallahassee, Ft. 32301		
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\text{S130.00 Filing Fee & Certified Copy}\$\$ Certificate of Status & Certified Copy} \$160.00 Filing Fee, Certified Copy		

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

IN COMPLAINCE WITH SECTION 608303, FLORIDA STATUTES, THE FOLLOWING IS SUBMI. IJMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	ITED TO REGISTER A FOREIGN
1. WRM IX GP, L.L.C. (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 Floric consent of the managers or managing members adopting the alternate name. The alternate name in Company," "L.I.C." "L.C.")	
2. Delaware 3, 27-3799930	
(Jurisdiction under the law of which foreign limited liability (FEI number, if company is organized)	applicable)
4, October 28, 2010 5, Perpetual	
(Dute of Organization) (Duration: Year limited liability cxist or "perpetual")	ity compuny will cease to
g.	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	-
7, 262 South Beach Road	
Hobe Sound, Florida 33455	
(Street Address of Principal Office)	9
3. If limited liability company is a manager-managed company, check here 🔲	動山 8
9. The name and usual business addresses of the managing members or managers	are as follows:
Infinity Funding Holdings, L.L.C.	
262 South Beach Road	
Hobe Sound, Florida 33455	
O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate interstation of the certificate under eath of the translation must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: Any I	s in a fòreign language, a
Signature of a member of an authorized representative of a new function of a new function of a new function of a new function of this document constitutes on a penalties of perjuly that the facts stated herein are true. I am aware that any false inform document to the Department of State constitutes a third degree felony as provided Paul D. Kazilionis, Chief Executive Officer	fürmation under the ation submitted in a
Typed or printed name of signec	TANGET AND A

(((H10000239118 3)))

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.

If unavailable, th	e alternate to be used	in the state of Florida is:		
			200	2# 25
2. The name and	the Florida street add	ress of the registered agent and office are:		- AGN
1	NRAI Services, Inc.			2
•		(Name)	7777	SK Sk
2	731 Executive Pa			% 36
4		I Address (P.O. Box NOT ACCEPTABLE)		မှူ
	Weston	_{PL} 33331		

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 of 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)

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBBY CERTIFY "WRM IX GP, L.L.C." 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 SECOND DAY OF NOVEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WRM IX GF, L.L.C." WAS FORMED ON THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2010.

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

4891228 8300 101049404

AUTHENTY CANTON, Bulles 2525 01 State

DATE: 11-02-10