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EXAMINER



July 13, 2012

Florida Dept. of State Division of Coprorations Registration Section

Re: CATENARY ALTERNATIVES PARTNERS GP, LLC CATENARY ALTERNATIVES PARTNERS, LP

Via: UPS

Dear Sir/Madam:

Enclosed please find the application for authorization to transact business for the above named foreign entities, their certificates of good standing and two checks in the amount of \$125.00 (for the LLC) and \$1000 (for the LP) for the filing of these entities. Please send all correspondence to:

Interstate Filings LLC 2071 Flatbush Avenue Suite 165 Brooklyn, NY 11234

Thank you in advance for your help and cooperation in filing these certificates. If you have any questions feel free to give me a call. I can be reached at 718-569-2703.

Sincerely, Alex Englard

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: CATENARY ALTERNATIVES PARTNERS GP, LLC						
Name of Limited Liability Company						
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida						
Please return all correspondence concerning this matter to the following:						
Alex Englard						
Name of Person						
Interstate Filings LLC						
Firm/Company						
2071 Flatbush Ave. Ste. 165						
Address						
Brooklyn, NY 11234						
City/State and Zip Code						
City/State and Zip Code						
contact@interstatefilings.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Al. Employee 749 560 2702						
Alex Englard at (718) 569-2703						
Name of Person Area Code & Daytime Telephone Number						
MAILING ADDRESS: STREET ADDRESS:						
Division of Corporations Division of Corporations						
Registration Section Registration Section						
P.O. Box 6327 Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle						
Tallahassee, FL 32301						
Enclosed is a check for the following amount:						
\$125.00 Filing Fee \$\int \\$130.00 Filing Fee & \int \\$155.00 Filing Fee & \int \\$160.00 Filing Fee, Certificate						
Certificate of Status Certified Copy of Status & Certified Copy						

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.	CATENARY ALTERNATIVES PARTNERS GP, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	_	
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	_	
ÇQ	Fname unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the use of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab ompany," "L.L.C," "LLC.")	– s writte ility	1
2.	DELAWARE 3 45-5155038		
	DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 45-5155038 (FEI number, if applicable)		
4.	4/19/2012 5. Perpetual		
	4/19/2012 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")		
6.			
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	- 12	
7.	3500 SOUTH DUPONT HIGHWAY ≥	ک	,
	DOVED DE 10001		
	DOVER, DE 19901 (Street Address of Principal Office)	_&	y y
		7	3
8.	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here	1: 3	***
9.	The name and usual business addresses of the managing members or managers are as follows:	34	
	PLEASE SEE ATTACHED		
		_	
		_	
10. 16a	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re	cords in	l
	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under eath of the translator must be submitted.)		
11	. Nature of business or purposes to be conducted or promoted in Florida:		
	Financial Services	_•	
	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 (rue.)		
	Alex Englard		
	Typed or printed name of signee		

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

CATENARY ALTERNATIVES PARTNERS GP, LLC

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

MEMBERS:

Eli Cohen: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

James Besaw: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

George Perez: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

Hugh Nickola: 1450 Brickell Ave, Suite 3050; Miami, Fl. 33131

JHGS Holdings LLC: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

MANAGERS:

Eli Cohen: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

James Besaw: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

George Perez: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

Jorge Herrera: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

Hugh Nickola: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

Guillermo Socarras: 1450 Brickell Ave, Suite 3050; Miami, FL 33131

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 Limited Liability Company is:					
CATENARY ALTERNATIVES PARTNERS GP, LLC					
If unavailable, the alternate to be used in the state of Florida is:					
2. The name and the Florida street address of the registered agent and office are:					
Zulay Labra					
(Name)					
1450 Brickell Avenue, Suite 3050					
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
Miami, FL 33131 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

\$ 30.00 \$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CATENARY ALTERNATIVES PARTNERS GP,

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 JULY, A.D.

2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CATENARY

ALTERNATIVES PARTNERS GP, LLC" WAS FORMED ON THE NINETEENTH DAY

OF APRIL, A.D. 2012.

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

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AUTHENTYCATION: 9705182

DATE: 07-12-12

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