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COVER LETTER

TO: Registration Section Division of Corpor		•	
	IOLDINGS, LLC		
SUBJECT:		Limited Liability Company	
			ansact Business in Florida," Certificate by company to transact business in Flori
Please return all correspond	ence concerning this matter to	o the following:	13 FE
ELIZABE	TH PALAZZOLA		SECULLANDS
		Name of Person	Ser Fr
PMSI, INC	•		SEE, FLORI
		Firm/Company	ORIO ORIO
175 KELS	EY LANE		7
		Address	
TAMPA,	FL 33619		
	Cit	ty/State and Zip Code	
elizabeth.pa	nlazzola@pmsionline.com		
	E-mail address: (to be	used for future annual report not	ification)
For further information conc	erning this matter, please cal	1:	
ELIZABETH PAL	AZZOLA	813 318-69	967
7	lame of Person	Area Code & Daytime Telephon	e Number
MAILING ADDR Division of Corpor Registration Sectio P.O. Box 6327 Tallahassee, FL 32	Divinis	REET ADDRESS: vision of Corporations gistration Section fton Building 61 Executive Center Circle tlahassee, FL 32301	
Enclosed is a check for		0. По тее до рис р о	Delen on Elling For Conditions
■ \$125.00 Filing F	ee ☐ \$130.00 Filing Fee Certificate of Statu	_	□ \$160.00 Filing Fee, Certificate 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 RUNINESS IN THE STATE OF FLORIDA

1. H.I.G. PMSI HOLDINGS, LLC (Name of Foreign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.," or "LLC.")
	pose of transacting business in Florida and attach a copy of the written ternate name. The alternate name must include "Limited Liability
2 DELAWARE	46-1720895
2. (Jurisdiction under the law of which foreign limited liability company is organized)	
4 11/29/2012	5. PERPETUAL
(Date of Organization)	(Duration: Year limited liability comparativill cease to exist or "perpetual")
6 11/29/2012	
(Date first transacted business in (See sections 608.501 & 608.502 F	S to determine penalty liability)
7	THE THE
	PH 4: 32
(Stroot Addre	ess of Principal Office)
(Sheet Addie	sss of Frincipal Office)
8. If limited liability company is a manager-manage	ed company, check here
0.00	
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
H.I.G. WC, LLC 1450 BRICKELL AVENUE, 31st FLO	OOR. MIAMI, FL 33131
	90 days old, duly authenticated by the official having custody of records in
	copy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be s	Submitted.)
11. Nature of business or purposes to be conducted	or promoted in Florida:
HOLDING COMPANY.	
× DW. Benz	7/10/-
	- 4/18/13
Signature of a member or an	authorized representative of a member.
Signature of a member or an	authorized representative of a member. xecution of this document constitutes an affirmation under the
Signature of a member or an (In accordance with section 608.408(3), F.S., the epenalties of perjury that the facts stated herein are	authorized representative of a member. xecution of this document constitutes an affirmation under the true. I am aware that any false information submitted in a
Signature of a member or an (In accordance with section 608.408(3), F.S., the epenalties of perjury that the facts stated herein are	authorized representative of a member. xecution of this document constitutes an affirmation under the true. I am aware that any false information submitted in a stee a third degree felony as provided for in s.817.155, F.S.)

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.

	e of the Limited Liability Company is:. HOLDINGS, LLG
If unavailabl	le, the alternate to be used in the state of Florida is:
2. The name	e and the Florida street address of the registered agent and office are:
	C.T. Corporation System
	(Name)
	1200 South Pine Island Road
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Plantation FL 33324
	Clty/Siate/Zlp
liability comp registered ago statutes relati	named as registered agent and to accept service of process for the above stated limited pany at the place designated in this certificate, I hereby accept the appointment as sent and agree to act in this capacity. I further agree to comply with the provisions of all ing to the proper and complete performance of my duties, and I am familiar with and ligations of my position as registered agent as provided for in Chapter 608, Florida CT Corporation System Madonna Cuddihy Special Assistant Secreta
	(Signature)
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "H.I.G. PMSI 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 FIFTEENTH DAY OF FEBRUARY, A.D. 2013.

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

5249905 8300

130183926

AUTHENTY CATION: 0220405

DATE: 02-15-13

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT
COPIES OF ALL DOCUMENTS ON FILE OF "H.I.G. PMSI HOLDINGS, LLC"
AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2012, AT 3:12 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "H.I.G. PMSI HOLDINGS,

LLC".

5249905 8100Н

130183111

AUTHENTICATION: 0220089

DATE: 02-15-13

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

State of Celaware
Secretary of State
Division of Corporations
Delivered 03:12 PM 11/29/2012
FILED 03:12 PM 11/29/2012
SRV 121275336 - 5249905 FILE
OF
H.I.G. PMSI HOLDINGS, LLC

Adopted in accordance with the provisions of §18-201 of the Limited Liability Company Act of the State of Delaware

The undersigned, being duly authorized to execute and file this Certificate of Formation for the purpose of forming a limited liability company pursuant to the Delaware Limited Liability Company Act, 6 Del. C. Section 18-201, et seq., does hereby certify as follows:

FIRST

The name of the limited liability company is H.I.G. PMSI Holdings, LLC, (the "Company").

SECOND

The address of the limited partnership's registered office in the State of Delaware is 1209 Orange Street in the City of Wilmington, County of New Castle, 19801. The name and address of the registered agent for service of process on the limited partnership in the State of Delaware is The Corporation Trust Company, 1209 Orange Street in the City of Wilmington, County of New Castle, 19801.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Formation as of the 29th day of November, 2012.

By: /s/ Joan D. Donovan

Name: Joan D. Donovan Title: Authorized Person