Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : NRAI SERVICES, LLC

Account Number : I20080000104 Phone : (302) 674-4089 Fax Number : (302)674-5266

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

Email Address: mleavitt@drydenfund.com

Foreign Limited Liability Company Dryden Capital GP, LLC

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Certificate of Status	0
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Page Count	03
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608-508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED HARD TO VARIANCE BY INDESS IN THE STATE OF FLORIDA:

LIMITED LIABILIT	Y COMPANY TO TRANSACT BUSINESS IN	NTHE STATE OF FLORIDA:		
1. Dryden Capital				
(Name of F	oreign Limited Liability Company; must i	include "Limited Liability Company," "L.L.C.,"	or "LLC.")	_
consent of the man Company," "L.L.C	agers or managing members adopting the	urpose of transacting business in Florida and alternate name. The alternate name must includ	ach a copy of the "Limited Liab	c written
2. Delaware		3.		
(Jurisdiction und company is orga	der the law of which foreign limited liabil inized)		=)	_
4. February 4, 20	013	5. perpetual	≫ ∕∞	20
" — (Date of Organization)	(Duration: Year limited liability comparist or "perpetual")	7 - 30	- 3 EE
6. upon filing			S.F.	α
·	(Date first transacted business (See sections 608.501 & 608.502	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)	SEE SEE	27
7. 777 Brickell A	Avenue, Suite 1200		<u></u>	TP .
Miami, Florid		,	STAT	Q2 ~-4.ఎ
	(Street Add	dress of Principal Office)	ירו של בר	\sim
	Suffington, 311 Greenwich Street, #5H, N	managing members of managers are as f lew York, NY 10013		
Matthew Lea	vitt, 777 Brickell Avenue, Suite 1200, Mi	iami, FL 33131	···	
the juristiction unitranslation of the o	original certificate of existence, no more that der the law of which it is organized. (A pho- ertificate under cath of the translator must be outliness or purposes to be conducted	Investments	aving custody (foreign language	of records in
				
	///-			
	Signature of a member or a	in authorized representative of a member	- [,	
(In		s execution of this document constitutes an affirmation		
D	enalties of perjury that the facts stated herein :	are true. I am aware that any false information su	bmitted in a	
d	MATTHEW	itutes a third degree felony as provided for in \$.5	517.155, F.S.) -	
	Typed or pri	inted name of signee		

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 Liabil	ity Company is:		
Dryden Capital GP, LLC			
If unavailable, the alternate to be u	sed in the state of Floridz is:		
2. The name and the Florida street	2013 FEB SEGRETA		
	NRAI Services, Inc.	AH!	
	(Name)	13FEB 27 A	\$.181400
	515 East Park Avenue		
Florida	a Street Address (P.O. Box NOT ACCEPTABLE)	STAT STAT	1
Tallahassee	FL 32301	32	
	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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

By: State auto actor
(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

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The First State

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

DELAWARE, DO HEREBY CERTIFY "DRYDEN CAPITAL 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 FOURTH DAY OF FEBRUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DRYDEN CAPITAL GP, LLC" WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2013.

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

& 32

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130125064

ton may verily this certificate only at corp. delevare. gov/authver. shtml

JEMPS W. Bullock, Secretary of State
AUTHENTY CATION: 0191446

DATE: 02-04-13