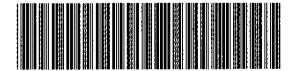
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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:

Office Use Only

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W13-24283



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SOFFICIENCY OF FILING

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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 25, 2013

CSC - CARINA L. DUNLAP

RESUBMIT

Please give original submission date as file date.

SUBJECT: HENDERSON MANAGING MEMBER LLC

Ref. Number: W13000024283

We have received your document for HENDERSON MANAGING MEMBER LLC and the authorization to debit your account in the amount of \$155.00. However, the document has not been filed and is being returned for the following:

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 313A00009980

THE CELL OF STATE OF

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ACCOUNT NO.	: 12000000195						
REFERENCE							
AUTHORIZATION	: Spellelena						
COST LIMIT							
ORDER DATE : April 23, 2013							
ORDER TIME : 4:43 PM							
ORDER NO. : 622217-005							
CUSTOMER NO: 7935488							
<u> </u>							
FOREIGN FILINGS							
NAME: HENDERSON MANAG LLC							
·	APR 24 CALLANA EAHASS						
XXXX QUALIFICATION (TYPE: LL)							
PLEASE RETURN THE FOLLOWING AS I	PROOF OF FILING:						
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STAN							

EXAMINER:

CONTACT PERSON: Carina L. Dunlap -- EXT# 52951

COVER LETTER

TO:	Registration Section Division of Corporations		
6.10 Y	Henderson Managing Member Li	LC	
SUBJI		ame of Limited Liability Company	_
The en Exister	closed "Application by Foreign Limited Lia ice, and check are submitted to register the	ability Company for Authorization to Transact Business in Florida above referenced foreign limited liability company to transact bus	ς" Certificate of siness in Florida
Please	return all correspondence concerning this m	natter to the following:	
	John J. Coyle 4th		
		Name of Person	_
Firm/Company		<u>~</u>	
	950 Calcon Hook Road, Suite 13		
Address		-	
	Sharon Hill, PA 19079		
City/State and Zip Code			- S. 28
	john@jcoylelaw.com	•	- AH
	E-mail address:	(to be used for future annual report notification)	
For fur	ther information concerning this matter, ple	ease call:	SSS
	John J. Coyle 4th	610 461-5000 at ()	PHIZ:
	Name of Person	Area Code & Daytime Telephone Number	: 38
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	¥ œ
Encio	sed is a check for the following amo	ing Fee & . 1555.00 Filing Fee & \$160.00 Filing Fee,	

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: Henderson Managing Member LLC (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 Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Delaware To be applied for 2. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Perpetual April 22, 2013 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") Upon registration (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 112 Chesley Drive, Suite 200 19063 Media, PA (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: The Henderson Group, Inc. 112 Chesley Drive, Ste 200, Media, PA 19063 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.) Ownership of real estate 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized representative of a member. (In accordance with section 608 AOB(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) John J. Covle 4th, Secretary Typed or printed 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.

	ne of the Limited Liability Cor Managing Member LLC	mpany is:		
If unavailal	ble, the alternate to be used in	the state of Florida is:		
2. The nam	ne and the Florida street addre	ess of the registered agent and office are:		
	Corporation Service Comp	pany		
		(Name)		
	1201 Hays Street			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		APR 24	CHEST.
	Tallahassee	32301 FL		
		City/State/Zip	112: 38 STAIL LORIDA	Terms.

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.

Corporation Service Company

By: (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HENDERSON MANAGING MEMBER 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 TWENTY-THIRD DAY OF APRIL, A.D.
2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HENDERSON MANAGING MEMBER LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF APRIL, A.D. 2013.

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

5323094 8300

130472130

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

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 0379361

DATE: 04-23-13