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SECRETARY OF STATE SECRETARY OF CORPORATIONS



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Z Capital Partners, L.L.C.	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.	
Please return all correspondence concerning this matter to the following:	
Martin J. Auerbach	
Name of Person	
Z Capital Partners, L.L.C.	SET DIVISI
Firm/Company	EB PRESE
150 Field Drive, Suite 300	F COM
Address	芸 常品で
Lake Forest, Illinois 60045	SIAFE RATIONS 9: 38
City/State and Zip Code	60 F ₅
compliance@zcap.net	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Martin J. Auerbach 212 704-4347	
Name of Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\Boxed{\text{Status}}\$ \$130.00 Filing Fee \$\Boxed{\text{Certified Copy}}\$ \$\$160.00 Filing Fee, \$\$Certified Copy}\$	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. Z Capital Partners, 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 Florida. The alternate name must include Liability Company," "L.L.C," or "L.L.C.")	de "Limi	ited
_{2.} Delaware _{3.} 41-2263648		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. NA		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 150 Field Drive, Suite 300	7.	INIO S
Lake Forest, Illinois 60045	4FEB	SION O
(Street Address of Principal Office) 6. 150 Field Drive, Suite 300	8	ARY OF SIAILONS OF CORPORATIONS
	===	유 유 우 우
Lake Forest, Illinois 60045 (Mailing Address)	ب تو	ATIO
	00) 5 5
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are	::	
James J. Zenni, Jr.		
President & CEO		
150 Field Drive, Suite 300, Lake Forest, Illinois 60045		
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the must be submitted) Signature of an authorized person In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts starting aware that any false information submitted in a becument to the Department of State constitutes a third degree felony as provided for in s.817.15	not transl	ator
James J. Zenni, Jr.		
Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

_	the Limited Liability Company is: Partners, L.L.C.	
•	he alternate to be used in the state of Florida is:	
2. The name ar	d the Florida street address of the registered agent and office are:	······
	David S. Romanik	
•	(Name)	. 02 √
	4415 SW 52nd Circle, Suite 108	SION
	Florida-Street Address (P.O. Box NOT ACCEPTABLE)	- 약자 - 약자
	CCala, FL 34474 FL	COFSTATE ORPORATIONS

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 605, Florida Statutes.

Mul Slau (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 "Z CAPITAL PARTNERS, 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 ELEVENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4476462 8300

140163741

AUTHENTICATION: 1127604

DATE: 02-11-14

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