(1/5)

Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000097174 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878~5368

**Enter	the	email a	ddress	for	this	busin	ess	entity	to	be	used	for	uture
ar	noual	report	mailin	gs.	Enter	only	one	email	add	ress	ple ;	ase,≰	EC.

Email Address:

Foreign Limited Liability Company COMPASS PARTNERS, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Division of C

Electronic Filing Menu

Corporate Filing Menu

Help

J. SHIVETS APR 2 4 2014

T-40 - m-2000 2 200- 00- 00- 00-

COVER LETTER

the second secon

TO:	Registration Section Division of Corporations						
SUBJ	ēċ~r.	Compass P	artners, L.L.C.				
	Name of Limited Liability Company						
				on to Transact Business in Florida," Certificate of I liability company to transact business in Florid			
Please	return all correspondence concerning this	is matter to the	following:				
		Rebecca L	. Ramstrom				
		Na	me of Person				
		Paul Hasi	ings LLP				
		Fig	mu/Company				
	d/o 11	170 Peachtres S	treet N.B., Suite 10	0			
			Address				
		Atlanta, Geo	rgia 30309				
		City/St	ate and Zip Code				
	reb	eccuramatrom	paulhastings.com				
	E-mail ad	dress; (to be used	for future annual rep	ort notification)			
For fu	rther information concerning this matter,	, please call:					
	Rebecca L. Ramstrom		at (404	815-2231			
	Name of Contact Pers	ion	Area Code	Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton I 2661 Ex	TADDRESS: n of Corporations ation Section Building secutive Center Circ ssee, FL 32301	de			
Encl	•	mount: Filing Fee & ate of Status	S155,00 Filing 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Compass Partners, L.L.C.				
(Name of Foreign Limited Lie	bility Company; must include "L	imited Liability Company,	""LLC,' or "LLC.")	
If name unavailable, enter alternate name a lability Company," "L.L.C," or "LLC.")	dopted for the purpose of transact	ting business in Florida. T	ne elterante neme must include	Limited
2. Delaware	3. 1	3-3851918		
(Jurisdiction under the law of which fore company is organized)	gn Innited liability	(FBI num	ber, if applicable)	
4(Date	first transacted business in Florid tions 605,0904 & 605,0905, F.S.	la, if prior to registration.)	itu)	
5. 1820 Ringling Blvd., Sarasotn, Flo	-	to describine patienty moon		
	(Street Address of Pr	ringinal Office)		 -
6. 1820 Ringling Blvd., Sarasota, Flor	•			
			SEI TALL	7
	(Mailing Ad	idress)	≥ā	- Are military or
7. The name, title or capacity a	nd address of the person(s	s) who has/have aut	hority to manage is/are	20
Richard E. Perlman, President, 1155 C	Center Place, Sarasota, Florida	34236	, the	
			FLOR	?
		,	TE	5
8. Attached is an original certific having custody of records in the acceptable. If the certificate is in must be submitted)	jurisdiction under the lav	v of which it is orga	nized. (A photocopy is	not
/				
	Signature of an au	thorized percon		
(in accordance with section 604,0203, F.S., the am aware that any false information submitted i	execution of this document constitute	a an affirmation under the pe	nalties of penjury that the facts sta felony as provided for in s.817.15	ted herein are true. 5, F.S.)
	Richard E. F	Perlman		
	Typed or printed na	me 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 POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The nam Compass Part	e of the Limited Liability Conners, L.L.C.	mpany is:	<u> </u>	
If unavailab	le, the alternate to be used in	the state of Florida is:		
2. The name	e and the Florida street addres	ss of the registered agent and office a	re:	
	CT Corporation System			
		(Namo)		
	1200 South Pine Island Road		FAS -	
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	EC.	rang:
	Plantation	FL 33324	PR 23	ni maga Rawang:
		City/State/Zip		hadea E
liability com registered at statutes relati	pany at the place designated to gent and agree to act in this ca ting to the proper and complet	nd to accept service of process for the in this certificate, I hereby accept the appacity. I further agree to comply with the performance of my duties, and I am gistered agent as provided for in Chap	above stated limited appointment as the provisions of all familiar with and	g someon Secretary
	By: Michael Linguis (Signature)	Michael Seraphin Asst. Secrets:	гу	

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMPASS 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 TWENTY-THIRD DAY OF APRIL, A.D. 2014.

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

5518998 8300

DATE: 04-23-14