Division of Corporations



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Foreign Limited Liability Company Stonehenge Florida NMTC Investment Fund V, LLC

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		CO	ver letter		
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SUBJECT:	Sionchenge Florida	NMTC Investment Fund	V, LLC		
		Name of Lim	ted Liability Company		
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Please retur	rn all correspondence c	oncerning this matter to the	ne following:		
	John P. Witten				
			Name of Person		
	Stonehenge Cap	ita) Company, LLC			
	<u></u>		Firm/Company		
	191 W. Nationw	ide Blvd., Suite 600	* Maria		
			Address	·	
	Columbus, Ol 1 4	13215		े केंन्स् स्ट्रिकेट	2014
		City	State and Zip Code	3	SEP
	memokuch@ston	eliengecapital.com			O comment
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For further I	Information concerning	this matter, please call:		ED'ca'	会 门
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M	lichele Makuch		at (614) 246-2	2456	င် ထဲ
	Name o	Contact Person	Area Code 1	Juytime Telephone Number	5
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	D. Box 6327		rantai section n Building		
	llahassee, FL 32314	26611	Executive Center Circle hassee, FL 32301		
	is a check for the fo		-	-	
G :	\$125.00 Filing Fee	O \$130.00 Filing Fee & Certificate of Status	S135.00 Filing Fee & Certified Copy	S160,00 Filing Fee, Centific of Status & Certified Copy	ale

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 LIBITARY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Stonehenge Florida NMTC Investment Fund V, LLC			
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LL.C.," or "LLC	.")	_	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name me Liability Company," "L.L.C." or "LLC.")	ist include "	Limited	
2. Delaware	_		
(Jurisdiction under the law of which foreign limited liability (FEI number, Fapplicable) company is organized)			
4. (upon filing)			
(Date liest transacted business in Planda, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215		_	
(Street Address of Principal Office)		_	
6. 191 W. Nationwide Blvd., Suite 600, Columbus, Olf 43215	<u> </u>	-2	
	単語の	S	acres (
(Mailing Address)	* 2	-	
7. The name, title or capacity and address of the person(s) who has/have authority to manage	is/arc.	5	-
Thomas J. Adamek, President, 236 Third Street, Baton Rouge, LA 70801		E	
John P. Witten, Secretary, 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215	SIA	ထဲ	T.
Barry G. Gowdy, Treasurer, 191 W. Nationwide Blvd., Suite 600, Columbus, OH 43215	25.1-2	2	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticate having custody of records in the jurisdiction under the law of which it is organized. (A photoc acceptable. If the certificate is in a foreign language, a translation of the certificate under oath must be submitted)	opy is no	t	
Signature of an authorized person (In accordance with section 603.0203, F.S., the exception of this document constitutes an affirmation under the penulties of perjury that the am aware that any folso information submitted in a document to the Department of State constitutes a third degree felony as provided for in	facts stated h \$ 817.155, F.	erein pre S.1	Mic (
John P. Witten			
Typed or printed name of signce			

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.

	ne of the Limited Liability Comp Porida NAITC Investment Fund V, LL	•		
Hunavailat	ole, the alternate to be used in the	e state of Florida is:		
2. The nan	ne and the Florida street address	of the registered agent and office are:		
	C T Corporation System			
		(Naine)		
	1200 South Pine Island Road	ä	20	
	l'Iorida Street Ade	dress (P.O. Box NOT accuptable)		1
	Plantation	[7], 33324 G	SEP 15	1
liability con registered a statutes rela	opony at the place designated in a agent and agree to act in this capa ating to the proper and complete p	to accept service of process for the above stated limithis certificate. I hereby accept the appointment as acity. I further agree to comply with the provisions of performance of my duties, and I am familiar with an intered agent as provided for in Chapter 605, Florida with the beautiful and the control of	Fall 5	Tanada en

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

FLUST -01 (62014 Walters Krawcz Chalme

Delaware

PACE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STONEHENGE FLORIDA NMTC INVESTMENT FUND V, 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 SEPTEMBER, A.D. 2014.

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

5528182 8300

141179225

You may verify this cortificate online at corp.delaware.gov/authvor.shtml Jeffrey W. Bullock, Secretary of State

DATE: 09-15-14