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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

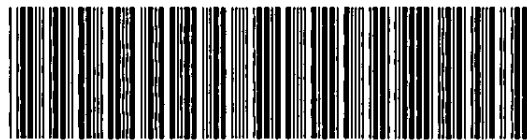
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/22/14--01003--020 \*\*1055.00

08/18/14--01012--016 \*\*130.00

14 SEP 17 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SEP 22 2014

T. HAMPTON

4445-410

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Fourth Dimension Capital Partners, LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

**C. Clay Massey**

Name of Person

Firm/Company

**452 Walls Way**

Address

**Osprey, FL 34229**

City/State and Zip Code

**cclaymassey@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**John H. Lively**

Name of Contact Person

at ( **913** )

Area Code

**660-0778**

Daytime Telephone Number

**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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

# 1940 Act | law group

John H. Lively  
The Law Offices of John H. Lively & Associates, Inc.  
A member firm of The 1940 Act Law Group  
11300 Tomahawk Creek Parkway, Suite 310  
Leawood, KS 66211  
Phone: 913.660.0778 Fax: 913.660.9157  
john.lively@1940actlawgroup.com

August 13, 2014

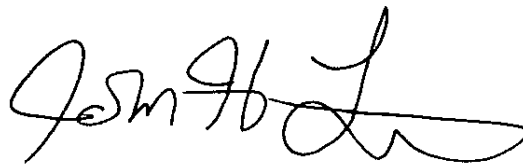
Florida Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

To whom it may concern:

Enclosed herewith for filing on behalf of my client, Fourth Dimension Capital Partners, LLC, is an Application by Foreign LLC for Authorization to Transact Business in Florida, along with a Certificate of Designation of Registered Agent and a Delaware Certificate of Good Standing. Also enclosed a check for \$130.00 to cover the filing fees.

If you have any questions about the foregoing, please contact me at (913) 660-0778.

Regards,

A handwritten signature in black ink, appearing to read "John H. Lively", with a stylized, flowing script.

John H. Lively

Enclosures

# 1940 Act | law group

John H. Lively  
The Law Offices of John H. Lively & Associates, Inc.  
A member firm of The 1940 Act Law Group  
11300 Tomahawk Creek Parkway, Suite 310  
Leawood, KS 66211  
Phone: 913.660.0778 Fax: 913.660.9157  
john.lively@1940actlawgroup.com

September 11, 2014

Florida Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314  
Attn: Tammy Hampton

Re: Fourth Dimension Capital Partners, LLC (Ref. W1400051116)

Dear Ms. Hampton:

In regards to your letter dated August 20, 2014, enclosed herewith for filing on behalf of our client, Fourth Dimension Capital Partners, LLC, is the resubmittal of the Application by Foreign LLC for Authorization to Transact Business in Florida. Also, per our phone call on September 10, 2014, the amount owed to cover the annual report and penalty fees was corrected to \$1,055.00. A check has been enclosed to cover those fees.

If you have any questions about the foregoing, please contact me at (864)641-1152.

Regards,



Sheri Huesman  
Executive Administrative Assistant

Cc: John Lively

Enclosures



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 20, 2014

C CLAY MASSEY  
452 WALLS WAY  
OSPREY, FL 34229

SUBJECT: FOURTH DIMENSION CAPITAL PARTNERS, LLC  
Ref. Number: W14000051116

We have received your document for FOURTH DIMENSION CAPITAL PARTNERS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is ~~\$916.25~~ ~~1055.00~~

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

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

Tammy Hampton  
Regulatory Specialist III

Letter Number: 714A00017961

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

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

1. Fourth Dimension Capital Partners, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 27-1402681

(FEI number, if applicable)

4. November 1, 2010

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 452 Walls Way

Osprey, FL 34229

(Street Address of Principal Office)

6. 452 Walls Way

Osprey, FL 34229

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

C. Clay Massey, Member, 452 Walls Way, Osprey, FL 34229

8. 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)

*C. Clay Massey By Darryl Seelhorst, Attorney in Fact*  
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 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.)

C. Clay Massey By: Darryl Seelhorst, Attorney in Fact

Typed or printed name of signer

14 SEP 17 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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.

1. The name of the Limited Liability Company is:

**Fourth Dimension Capital Partners, LLC**

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

**C. Clay Massey**

(Name)

**452 Walls Way**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Osprey**

**FL 34229**

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.*

*C. Clay Massey By: [Signature] Attorney in fact*

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

14 SEP 17 PM 1:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FOURTH DIMENSION CAPITAL PARTNERS, 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 THIRTIETH DAY OF JULY, A.D. 2014.

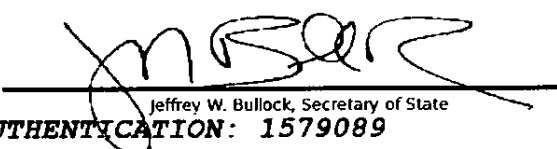
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FOURTH DIMENSION CAPITAL PARTNERS, LLC" WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2009.

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

4759391 8300

141013535



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1579089

DATE: 07-30-14