Page 1 of 1

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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\*

#### Foreign Limited Liability Company CRP/INSITE CLIPPER, L.L.C.

Certificate of Status	0
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Corporate Filing Menu

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#### **COVER LETTER**

	sistration Section Islan of Corporations		
SUBJECT	CRP/Insite Clipper, L.L.C.		
0000000	Name	of Limited Linbility Company	
The enclosed Existence, ar	l "Application by Foreign Limited Liabi id check are submitted to register the ab	lity Company for Authorization	n to Transact Business in Florida," Certificate of liability company to transact business in Florida
Please return	all correspondence concerning this mat	ter to the following:	
	Stacy M. Rosenthal		
		Name of Person	
	The Carlyle Group		
		Firm/Company	
	1001 Pennsylvania Ave NW	<u> </u>	
		Address	
	Weshington DC 20004		<b>_</b> _
		City/State and Zip Code	
	stacy.rosenthal@carlyle.com		
	E-mail address:	to be used for future annual repo	ri notification)
Por further i	nformation concerning this matter, pleas	e cali:	
Sta	cy M. Rosenthal	at ( 202	729-5251
	Name of Contact Person	Area Code	Dayline Telephone Number
Div Reg P.O	ILING ADDRESS: ision of Corporations distriction Section . Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Comporations Registration Section Clifton Building 2661 Executive Center Circl Tallahassea, PL 32301	6
	s a check for the following amounts 125,00 Filing Fee \$130.00 Filing Certificate of the feet of the fe	Fee & 🔲 \$155.00 Filing 1	

# 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:

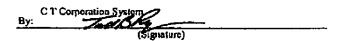
f name unavailable, enter alternate name adopted for the purpose	of transaction husiness in Florida. The atternate name of	ust include "Limit
iability Company," "L.L.C," or "LLC.")		
Delaware	3, 47-1814596	₩o
(Jurisdiction under the law of which foreign limited limitity company is organized)	(FEI number, (l'applicable)	
Upon registration		<u> </u>
(Date list transacted busine (See sections 605.0904 & 605.0	ss in Florida, if prior to registration.) 1905, F.S. to determine penalty liability)	155 155
1001 Pennsylvania Ave NW, Washington DC 20004		
(Street Ad	dress of (*rincipal Office)	
1001 Pennsylvania Ave NW, Washington DC 20004		조조 연유
•	weiling Address) person(s) who has/have authority to manag	e is/are:
7. The name, title or capacity and address of the	person(s) who has/have authority to manage	e is/are:
7. The name, title or capacity and address of the	person(s) who has/have authority to manage	e is/are:
The name, title or capacity and address of the papello MM, LLC; Manager, 1825 Main Street, Suite 235, No. 1, 1825 Main Street, Suite 235,	person(s) who has/have authority to manage Weston, Florida 33326	
7. The name, title or capacity and address of the papello MM, LLC; Manager, 1825 Main Street, Suite 235, V	person(s) who has/have authority to manage Weston, Florida 33326 no more than 90 days old, duly authenticate the law of which it is organized. (A photo	ed by the offic
The name, title or capacity and address of the papello MM, LLC; Manager, 1825 Main Street, Suite 235,	person(s) who has/have authority to manage Weston, Florida 33326 no more than 90 days old, duly authenticate the law of which it is organized. (A photo	ed by the offic
The name, title or capacity and address of the populo MM, LLC; Manager, 1825 Main Street, Suite 235, M	person(s) who has/have authority to manage Weston, Florida 33326  no more than 90 days old, duly authenticate the law of which it is organized. (A photoge, a translation of the certificate under oath of an authorized person torstitutes on atthmation and the penaltics of perjuty that the constitutes on altimation and of the penaltics of perjuty that the	ed by the office copy is not a of the translate controls and the controls are the controls and the controls are the controls and the controls are the control are the co
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# 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.

If unavaila <b>bic,</b> the	e alternate to be used i	in the state of Florida is:	
	<del></del>		
2. The name and	the Florida street add	ress of the registered agent and office are:	
•	C T Corporation System		i AL
•		(Nanic)	I OCT
	1200 South Pine Island Ro	ಇರೆ	
	(2124- C4	et Address (P.O. Box NOT ACCEPTABLE)	SSS (SS)
نِ	rionan Stree	•	4 1 1 1 1 1 1
-	r iorian Stree Plantation	FL 33324	## 7: 01 SI

Having been named as registered agent und 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.



\$ 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 "CRP/INSITE CLIPPER, 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 SEVENTEENTH DAY OF OCTOBER, A.D. 2014.

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

5602006 8300

141306488

You may verify this cortificate online at corp.deleware.gov/authver.shtml

AUTHENTICATION: 1789902

DATE: 10-17-14