

M1500000740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

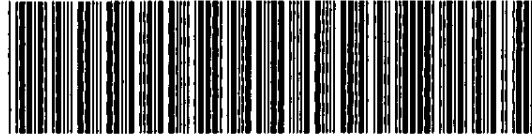
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Special Instructions to Filing Officer:

W15-3457
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 29 2015

D. BRUCE



January 26, 2015

Via Federal Express

Florida Department of State
Division of Corporations
ATTN: Deborah Bruce
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: *Supply Chain Equity Partners I, LLC*

Dear Deborah:

Enclosed please find the revised filing for the subject entity, per your instructions. Should you need anything further, please do not hesitate to contact me. Thank you.

Sincerely,

Rachel M. Stewart
Paralegal

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TALLAHASSEE FLORIDA

V 216-736-7275
F 216-621-6536
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2015

RACHEL M. STEWART
KOHMAN JACKSON & KRANTZ PLL
1375 E. 9TH STREET, 20TH FLOOR
CLEVELAND, OH 44114

SUBJECT: SUPPLY CHAIN EQUITY PARTNERS I, LLC
Ref. Number: W15000003457

We have received your document for SUPPLY CHAIN EQUITY PARTNERS I, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 515A00000996

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TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SUPPLY CHAIN EQUITY PARTNERS I, 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:

RACHEL M. STEWART

Name of Person

KOHRMAN JACKSON & KRANTZ PLL

Firm/Company

1375 E. 9TH STREET, 20TH FLOOR

Address

CLEVELAND, OH 44114

City/State and Zip Code

RMB@KJK.COM

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

For further information concerning this matter, please call:

RACHEL M. STEWART at **216** **736-7275**

Name of Contact Person

Area Code

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 JAN 29 PM 4:41

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**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. SUPPLY CHAIN EQUITY PARTNERS I, 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. 20-8596087

(FEI number, if applicable)

4. _____

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

5. 100 S. ASHLEY DRIVE, SUITE 2100

TAMPA, FL 33602

(Street Address of Principal Office)

6. 100 S. ASHLEY DRIVE, SUITE 2100

TAMPA, FL 33602

(Mailing Address)

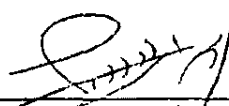
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

SCE PARTNERS CORP., MANAGER

100 S. ASHLEY DRIVE, SUITE 2100

TAMPA, FL 33602

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)



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.)

Nir Gabriely, President, SCE PARTNERS CORP.

Typed or printed name of signee

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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:

SUPPLY CHAIN EQUITY PARTNERS I, 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:

REGISTERED AGENT SOLUTIONS, INC.

(Name)

155 OFFICE PLAZA DRIVE, SUITE A

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


TALLAHASSEE

32301

FL

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.


(Signature) **Assoc. Sec.**

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

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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 "SUPPLY CHAIN EQUITY PARTNERS I, 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 TWENTY-NINTH DAY OF DECEMBER, A.D. 2014.

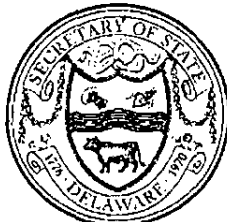
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUPPLY CHAIN EQUITY PARTNERS I, LLC" WAS FORMED ON THE EIGHTH DAY OF MARCH, A.D. 2007.


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

4313726 8300

141596012

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1994861

DATE: 12-29-14