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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

October 5, 2015

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, Toro Partners Capital Management, LLC, is a Cover Letter, Application by Foreign LLC for Authorization to Transact Business in Florida, along with 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,

John H. Lively

COVER LETTER

r: \$

TO:	Registration Section Division of Corporations		
SUBJEC	Toro Partners Capital Management, LLC		
		me of Limited Liability Company	
		Company for Authorization to Transact Business in Florida," Certifice referenced foreign limited liability company to transact business in Fl	
Please re	eturn 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	
	celaymassey@gmail.com		
	E-mail address: (to t	oe used for future annual report notification)	
For furth	ner information concerning this matter, please ca	di:	
	Clay Massey	941 918-9749 at ()	
	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 Tallahassec, FL 32301	
	d is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee Certificate of Status		;

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

		for the purpose of	transacting busine	ss in Florida. The alternate r	name must include "Limited
Liability Company," "L.L.C, Delaware	" or "LLC.")		, 27-3708662		
(Jurisdiction under the law	of which foreign limite		3. 27-3708002	(FEI number, if applicab	ile)
company is organized)					
June 1, 2015	(Date first trai	nsacted business in	Florida, if prior t	o registration.) e penalty liability)	
452 Walla Way	(See sections 60)	5.0904 & 605.090:	5, F.S. to determin	e penalty liability)	
3. 452 Walls Way					
Osprey, FL 34229					
	(Stree	t Address of Princ	ipal Office)		
5. 452 Walls Way			***************************************		- 54 8 TI
Osprey, FL 34229					
		(Mailing Addr	ess)		
. Name and street addres	ss of Florida registere	ed agent: (P.O. E	Box <u>NOT</u> accep	table)	
Name:	C. Clay Massey				
	452 Walls Way			_	Sir or
Office Address:					
	Osprey				
	Ospiv)			_, Florida	
laving been named as re	tance: gistered agent and to			(Zip code) ne above stated corporation	on at the place designated
laving been named as rethis application, I hereby with the provisions of all the obligations of my positions. 3. The name, title or capa	tance: gistered agent and to accept the appointm statutes relative to th ition as registered ag	Registered the person(s) who	agent and agreemplete perform agent's signature has/have autho	(Zip code) te above stated corporation te to act in this capacity. ance of my duties, and I described rity to manage is/are:	I further agree to compl
his application, I hereby	tance: gistered agent and to accept the appointm statutes relative to th ition as registered ag	Registered the person(s) who	agent and agreemplete perform agent's signature has/have autho	(Zip code) te above stated corporation te to act in this capacity. ance of my duties, and I described rity to manage is/are:	on at the place designated I further agree to compl am familiar with and acc
Having been named as rethis application, I hereby with the provisions of all she obligations of my positions. B. The name, title or capact. Clay Massey, Manager. Attached is a certificate.	tance: gistered agent and to accept the appointm statutes relative to th ition as registered agent acity and address of the of the General Partn of existence, no more of which it is organization	Registered the person(s) who her, 452 Walls We the than 90 days of	agent's signature has/have autho ay, Osprey, FL	(Zip code) te above stated corporation te to act in this capacity. ance of my duties, and I described rity to manage is/are:	I further agree to complant familiar with and accomplete the second seco
laving been named as rehis application, I hereby with the provisions of all she obligations of my positive obligations of my positive. B. The name, title or capa C. Clay Massey, Manager C. Clay Massey, Manager C. Attached is a certificate urisdiction under the law or the law of the la	tance: gistered agent and to accept the appointm statutes relative to th ition as registered ag acity and address of t of the General Partr of existence, no mor	Registered the person(s) who her, 452 Walls We the than 90 days of	agent's signature has/have autho ay, Osprey, FL	(Zip code) the above stated corporation is to act in this capacity. It is ance of my duties, and I do a state in this capacity. The above stated corporation is a state in this capacity. It is a state in this capacity in this capacity. It is a state in this capacity in this capacity. It is a state in this capacity in this capacity. It is a state in this capacity in this capacity. It is a state in this capacity in this capacity. It is a state in this capacity in this capacity in this capacity is a state in this capacity. It is a state in this capacity in this capacity in this capacity is a state in this capacity in this capacity is a state in this capacity in this capacity is a state in this capacity in this capacity is a state	I further agree to complant familiar with and accomplete the second seco

C. CEM MASON BY SEN JOHNSON PUR
Typed or printed name of signee

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.)

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TORO PARTNERS CAPITAL MANAGMENT, 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 SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TORO PARTNERS

CAPITAL MANAGMENT, LLC" WAS FORMED ON THE TENTH DAY OF AUGUST, A.D.

2010.

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

Authentication: 10159185

Date: 09-30-15

4858526 8300 SR# 20150328660