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PICK-UP	MAIT	MAIL
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December 7, 2015

MARK CHMIELARSKI 201 E PINE ST SUITE 500 ORLANDO, FL 32801

SUBJECT: CODE CAPITAL PARTNERS, L.L.C.

Ref. Number: W15000078659

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

The name of the entity must be identical throughout the document.

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 the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 615A00025507

#### **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	Code Capital Partners, L.L.C.
3000	Name of Limited Liability Company
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please	urn all correspondence concerning this matter to the following:
•	Mark J. Chmielarski
	Name of Person
	Greenspoon Marder, P.A.
	Firm/Company
	201 E. Pine Street, Suite 500
	Address
	Orlando, FL 32801
	City/State and Zip Code
	mark.chmielarski@gmlaw.com
	E-mail address: (to be used for future annual report notification)
For fur	r information concerning this matter, please call:
	Mark J. Chmielarski, Esq. 407 425-6559 at ( )
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section CO. Box 6327 Callahassee, FL 32314 Callahassee, FL 32314 Construction Section Section Construction Section Section Section Section Section Section Section S
Enclos	is a check for the following amount:  ☐ \$125.00 Filing Fee   ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate  Certificate of Status

## 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Fo	oreign Limited Liability Company; must include '	'Limited Liability Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter Liability Company," "L.L.C		_	e must include "Limited
2. Utah	.3. 46	5-2166823	
(Jurisdiction under the law company is organized)	w of which foreign limited liability	(FEI number, if applicable)	
l	(Date first transacted business in Florid (See sections 605.0904 & 605.0905, F.S.	la, if prior to registration.)	
131 Soundview Lane		a diameter point, admity)	
New Cansan, CT 068			
Same as above	(Street Address of Principal O	ince)	
	(Mailing Address)		
Name and street addre	ss of Florida registered agent: (P.O. Box N	OT_acceptable)	
Name:	Mark I. Chmielarski, Esq.		
Office Address:	201 E. Pine Street, Suite 500		
	Orlando	Florida 32801	
	(City)	(Zip code)	
	otance:	,	
aving been named as re signated in this applica complywith the provisi	otance: egistered agent and to accept service of pro- stion, I hereby accept the appointment as re- stions of all statutes relative to the paper and my position as registered agent.	cess for the above stated limited liabili gistered agent and agree to act in this i complete performance of my duties,	capacity. I further agre and I am familiar with a
aving been named as resignated in this applica complywith the provision	otance: egistered agent and to accept service of pro- ution, I hereby accept the appointment as re- ions of all statutes relative to the papper and my position as registered agent.	cess for the above stated limited liabili gistered agent and agree to act in this i complete performance of my duties,	capacity. I further agree
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#### **Utah Department of Commerce**

#### Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, UT 84114-6705
Service Center: (801) 530-4849
Toll Free: (877) 526-3994 Utah Residents
Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

11/25/2015 8597056-016011252015-1962947

### CERTIFICATE OF EXISTENCE

Registration Number:

8597056-0160

**Business Name:** 

CODE CAPITAL PARTNERS LLC

Registered Date:

April 05, 2013

Entity Type:

LLC - Domestic

Current Status:

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.

Nathy Ber



Kathy Berg Director

Division of Corporations and Commercial Code :