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(((H16000191102 3)))



H160001911023ABCV

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## Foreign Limited Liability Company **CAAM Fund II LLC**

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	legistration Section Nvision of Corporations			<i>y</i> "	
SUBJECT	CAAM Fund II LLC				
	·.	Name of Limi	ted Liability	Company	
				tion to Transact Business in Florida," ted (lability company to transact busin	
Please reiv	im all correspondence concerning thi	s matter to the follo	wing:	·	
	Amanda B. Sanders				
		Name	of Person		
	Chromalloy Gas Turbine LL	c			,
		Firm/C	ompany		
	330 Blaisdell Road				
		Ad	dress	,	
	Orangeburg, NY 10962		•	•	
		City/State a	nd Zip Code		
	asanders@chromalloy.com	•			
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For further	information concerning this matter, p	please call:			
A	manda B. Sanders	ni	845	230-7347	
	Name of Contact Pers		Area Code	Daytime Telephone Number	
D Ri P.	AILING ADDRESS:  ivision of Corporations  egistration Section  O. Box 6327  allahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2016

CT CORPORATION SYSTEM

SUBJECT: CAAM FUND II LLC

REF: W16000054565

SECRETARY OF STATE ALLIANS ARE SECRETARY OF STATE

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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Karen A Saly Regulatory Specialist II FAX Aud. #: H16000191102 Letter Number: 516A00016595

2016 AUG -8 AM 11:57 TALL AHASSER, FLORIGA

to a similar sign of the sign of submission <u>s/s</u>

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

IN COMPLIANCE WITH SECTION 605/002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPAINY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L CAAM Fund II LLC	MAY CONTROL OF PLANES					
(Name of For	eign Limited Liability Company; mus	st include "Limited Lia	bility Company," "L.L.C.," or "LI	LC.")		
Liability Company," "L.L.C,	iternate name adopted for the purpose " or "LLC.")	•	ss in Florida. The alternate name s	nust include "I	Limited	
2. Delaware		3. 81-3443329				
(Jurisdiction under the law company is organized)	of which foreign fimited liability		(FEI number, if applicable)			
4, 8/3/2016						
	(Date first Impracted busines (See sections 605.0904 & 605.0	ss in Florida, if prior to 0905; F.S. to determin	registration.) e pensity liability)			
5. 3600 NW 54th Street,		·				
Ft. Lauderdale, Fl 3330	10				Ö.	
Ft. Ladocrdale, Ft 3330	(Street Address of P	'rincipal Office)		<u></u>		Red A Street
6 c/o Chromalloy Materia	el Solutions LLC, 3600 NW 54th				<u>.</u>	
					င်ာ	1 44
Ft. Lauderdale, FI 3330	VO (Malling A	(Ge-22)		(D) -21	727	* 1. 1
	. •	•		71		hammel 1 a. e.
7. Name and street addres	s of Florida registered agent: (P.6	O. Box <u>NOT</u> accept	able)	- 55 - 75 - 75 - 75	بي	فيسيدنا
Name:	C T Corporation System	· · · · · · · · · · · · · · · · · · ·	_	EF	တ	
Office Address:	1200 South Pine Island Road			حة		
•	Plantation		, Florido 33324 (Zip code)			
	(City)		(Zip code)			
designated in this applicant to complywith the provision	tance; gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the p my position as registered agent. C T Corporation Sy	ment as registered a proper and complete	gent and agree to act in this co performance of my duties, an Debble Diaz	opacity. I fui rd I ans fossii	riiter a	gree
	(Registe	reconfent's signature)	Assistant Secretar	У		
8. The name, title or capa	city and address of the person(s)	who has/have author	ity to manage is/are:	-		
Jim Gluliano, Manager			-			
9. Attached is a certificate jurisdiction under the law cof the translator must be su	( KM Challes	rifficate to time for elg	n language, a translation of the	lody of record spertificate u	is in th nder o	e sth
	<b>_</b>	Fam futhorized to fsor				
This document is executed submitted in a document to	in accordance with section 605.02 the Department of State constitute	203 (1) (b <del>), l'lori</del> da 5 es a third degree felo	Statutes. I am aware that any fal ony as provided for in \$.817.15:	se informatio 5, P.S.	n	
	Amanda B. Sanders	detect name of the				
	t Abea os bit	inted name of signee				



Page 1

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

DELAWARE, DO HEREBY CERTIFY "CAAM FUND II 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 FOURTH DAY OF AUGUST, A.D. 2016.

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

6114273 8300 SR# 20165236837

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

Selfrey W. Bushock, Secretary of State

Authentication: 202778745

Date: 08-04-16