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Certificate of Registration

FOREIGN Limited Partnership

→ Filing Fee: \$100.00 minimum

Pursuant to the provisions of RIGL <u>7-13-49</u>, the undersigned foreign limited partnership hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement

hat purpose submits the following statement.				
The name of the limited partnership is:				
CNHF FUND II, L.P.				
The name, if different, which it elects to use in Rhode Island	IS:			
2. The limited partnership is organized under the laws of. 3. The date of its formation is.		S.		
Delaware	03/01/2019			
4. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
Other Depository Credit Intermediation				
5. The name and address of the registered agent/office in R	thode Island is:			
Agent Name C T Corporation System				
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A				
City/Town East Providence	State RHODE ISLAND	Zıp Code 02914		
6. The Department of State is appointed the agent of the fo time, there is no registered agent or if the registered agent diligence.	reign limited liability partnership cannot be found or served follo	o for service of process if, at any wing the exercise of reasonable		
 The address of the office required to be maintained in the if not so required, of the principal office of the foreign limited 	e state or country of its organizated partnership is:	ation by the laws of that state or,		
24 East Ave, #1285 New Canaan, Connecticut 06840				

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website:** www.sos.ri.gov

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FORM 350-Reviseo 08/2020

8. The name and business address of each general partner is:				
GENERAL PARTNER	BUSINESS ADDRESS			
CNH Finance GP LLC	24 East Ave, #1285 New Canaan, Connecticut 06840			
		-		
9. The address of the office at which is kept a list of the names and addresses of the limited partners and their capital contributions, together with an undertaking by the foreign limited partnership to keep those records until the foreign limited partnership's registration in this state is cancelled or withdrawn is: 24 East Ave, #1285 New Canaan, Connecticut 06840				
10. The mailing address for the foreign limited partnership is:				
Address 24 East Ave, #1285				
City/Town New Canaan	s	State CT	Zıp Code 06840	
11. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.				
Under penalty of perjury, I declare and affi Foreign Limited Partnership, including any and correct.	irm that I have examin	ed this Application for Certific Iments, and that all statemen	cate of Registration of a nts contained herein are true	
Type or Print Name of General Partner			Date	
Timothy Peters			03/09/2022	
Signature of General Partner				

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CNHF FUND II, L.P." 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 NINTH DAY OF MARCH, A.D. 2022.

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

7303998 8300 SR# 20220944768 Authentication: 202873449

Date: 03-09-22