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CAPITOL SERVICES d/b/a PARALEGAL & ATTORNEY SERVICE BUREAU, INC.		00 M SECI
(Requestor's Name) 1406 Hays Street, Suite 2		FILEI MAR 13 1 CRETARY LAHASSEI
(Address) Tallahassee, FL 32301 (904) 656-3992	OFFICE USE ONLY	PM PM
(City, State, Zip) (Phone #)		2: 16 5 TATE LORUE
	40000	3168694-

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1 Lonin CARI	tal Mynagement, L	LLC	
(Corporation	Name)	(Document #)	
2. (Corporation	Name)	(Document #)	
3. (Corporation	Name)	(Document #)	MAX
4.			1400-41
(Corporation	n Name)	(Document #)	003-
Walk in Pick	cup time <u>3/13</u>	Certified Copy	
	ll wait Photocopy	Certificate of Status	Q Q
NEW FILINGS	AMENDMENTS		A
Profit	Amendment		(10
NonProfit	Resignation of R.A., Officer	/Director	
\ Kimited Liability	Change of Registered Agent	t	
Domestication	Dissolution/Withdrawal		ZÃ
Other	Merger		OO MAR SIDH OF TLATAS
		• • • • • • • • • • • • • • • • • • •	\$ 93 8
OTHER FILINGS	REGISTRATION/ QUALIFICATION		研究等。
Annual Report	Foreign		MAR 13 AN II: 05 RIMENT OF STATE WOLCORPORATIONS ANASSEE, FLORIDA
Fictitious Name			
Name Reservation	Limited Partnership		25 D 25
	Reinstatement	* *	-
	Trademark		

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of fore	ign lun	ited liability company)	~
Delaware	3.	N/A	
(Jurisdiction under the law of which foreign limited liabil company is organized)	lity .	(FEI number, if applicable)	
January 20, 2000	5.	Perpetual AR F	<u></u>
(Date of Organization)	•	(Duration: Year limited liability company will seem to exist or "perpetual")	FILE
Upon Qualification			ž –
(Date first transacted business in Florida.	. (See se	カー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	D 12: 1
650 West Ave. Suite 2502		<u> 5</u> m	<u></u>
Miami Beach, Florida 33193			
	dress of	principal office)	-
If limited liability company is a manager-mana	aged co	ompany, check here X	
The usual business addresses of the managing	memb	ers or managers are as follows:	
(50.77		•	
650 West Ave. Suite 2502			-
Miami Beach, Florida 33193			
			_
			- .
			-
Attached is an original certificate of existence, no more that e-jurisdiction under the law of which it is organized. (A pho		rys old, duly authenicated by the official having custody of m	coards in
anslation of the certificate under oath of the translator must be		•	
Nature of business or purposes to be conducte	ed or p	promoted in Florida: To engage in or rransac	t any
all lawful activities or pusiness perm	nitted	under the laws of the United States, t	
State of Florida, or any other state,	count	y, territory or nation.	- -
Nhwh			
	n auth	orized representative of a member.	•
(In accordance with section 608.408	3(3), F.S	, the execution of this document constitutes what the tacts stated herein are true.)	
Magnus Friksson			
Typed or pri	inted r	ame of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

the Limited Liability Company is:	OD MAR 13 SECRETAR TALLAHAS
 nd the Florida street address of the registered agent and office are:	E P
National Corporate Research, Ltd., Inc. (Name)	HIZ: 16 FSTATE FLORIDA
1406 Hays Street Suite No.2 Florida street address (P.O. Bux NOT ACCEPTABLE)	
Tallahassee FL 32301 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 608, F.S...

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of Delaware Office of the Secretary of State

PAGE :

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RONIN CAPITAL MANAGEMENT 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 NINTH DAY OF MARCH, A.D. 2000.

AND I DO_HEREBY FURTHER CERTIFY THAT THE SAID "RONIN CAPITAL MANAGEMENT LLC" WAS FORMED ON THE TWENTIETH DAY OF JANUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.

Edward I. Freel, Secretary of State

DATE:

AUTHENTICATION:

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001120940

8300

3161401

03-09-00