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(F	Requestor's Name)			
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EXAMINER

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November 7, 2008

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

SM Capital Group, LLC

Filing Evidence □ Plain/Confirmation Cop	ру	Type of Docume ☐ Certificate of Sta	tus SSECTION OF THE STATE OF TH
□ Certified Copy		□ Certificate of Go	od Standing 9
		□ Articles Only	Dr.
Retrieval Request Photocopy Certified Copy		☐ All Charter Docu Articles & Amen ☐ Fictitious Name (dments
 NEW FILINGS		AMENDMENTS	
 Profit		Amendment	
Non Profit		Resignation of RA Officer/Director	
Limited Liability		Change of Registered Agent	
Domestication		Dissolution/Withdrawal	
Other		Merger	
OTHER FILINGS		REGISTRATION/QUALIFICATION	
Annual Reports		Foreign	
Fictitious Name	X	Limited Liability	
Name Reservation		Reinstatement	
Reinstatement		Trademark	
		Other	

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

N COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
SM CAPITAL GROUP, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C.," "LLC.")
DELAWARE 3, 26-3598278
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
OCTOBER 8, 2008 5. DECEMBER 31, 2038
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
UPON QUALIFICATION
(Street Address of Principal Office) (Street Address of Principal Office) (Street Address of Principal Office)
2200 Biscayne Boulevard, MIAMI, FLORIDA 33137
2200 Disday to Doulevard, Will Will, 1 201 (10) 1 00 107
(Street Address of Principal Office)
. If limited liability company is a manager-managed company, check here 🗹 💮 🔑 🥺
. The name and usual business addresses of the managing members or managers are as follows:
Sonny Kahn, MGR, 2200 Biscayne Blvd., Miami, FL 33137
Russell Galbut, MGR, 2200 Biscayne Blvd., Miami, FL 33137
Bruce Menin, MGR, 2200 Biscayne Blvd., Miami, FL 33137
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under cath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE INVESTMENT

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Sharon Christenbury, Esq., Authorized Representative

Typed or printed name 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.

1. The name of the Limited Liability Company is: SM CAPITAL GROUP, LLC				
If name unavailable, the alternate name to be used in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are: NRAI Services, Inc.				
(Name)				
Florida Street Address (P.O. Box NOT ACCEPTABLE) We Stron FL 33331 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, Florida Statutes.

Acison Hand
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SM CAPITAL GROUP, 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 TENTH DAY OF NOVEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SM CAPITAL GROUP, LLC" WAS FORMED ON THE EIGHTH DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4610013 8300

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Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6958067

DATE: 11-10-08

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