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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FEB 1 6 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GEMINI CAPITAL GROUP, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
RYAN FEALEY Name of Person
GEMINI CAPITAL GROUP, LLC Firm/Company
177 E. 87th St, Stc 408
New York, NY 10128 City/State and Zip Code
RYAN @ VULCAN MG MT. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RYAN FEALEY at (212) 566 - 1800 Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\int_{\$125.00 \text{ Filing Fee}} \$130.00 \text{ Filing Fee & Certificate of Status}\$ \$\int_{\$Certificate \text{ Opy}} \$155.00 \text{ Filing Fee & Certified Copy}\$ \$\int_{\$Certified \text{ Copy}} \$160.00 \text{ Filing Fee, Certified Copy}\$

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	GN
1. GEMINI CAPITAL GROUP, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	en
2. DE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-2914862 (FEI number, if applicable)	
4. 6/2/2008 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 177 E. 87th St, Ste 408	
New York, NY 10128 (Street Address of Principal Office)	<u>'</u>
(Street Address of Principal Office)	50 50
8. If limited liability company is a manager-managed company, check here	7.7
8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows:	E
Roger Neustadt	1
177 E. 875 St, Ste 408	
New York, NY 10128	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)	n
11. Nature of business or purposes to be conducted or promoted in Florida:	
Consumer Collection Agency Ryn for	
Rynhi	
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	
RYAN FEALEY	
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:
Gemini Capital Group, LLC	
If unavailable, the alternate to be use	ed in the state of Florida is:
2. The name and the Florida street a	ddress of the registered agent and office are:
C T Corporation System	
	(Name)
1200 South Pine Island R	Road
Florida St	reet Address (P.O. Box NOT ACCEPTABLE)
Plantation	FL 33324
	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.

By: Michele Miller
(Signature) Assistant Secretary

\$ 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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GEMINI 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 SEVENTEENTH DAY OF JANUARY, A.D. 2012.

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

4555183 8300

120051170

AUTHENTICATION: 9298771

DATE: 01-17-12

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