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MJH

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: TRIAD PROFESSIONAL SERVICES, LLC

Account Number: I20020000094 Phone

: (678)559-2446

Fax Number

: (678)553-2301

FOREIGN LIMITED LIABILITY COMPANY

SWERDLOW REAL ESTATE GROUP, LLC

	<u></u> _
Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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

	şwerdlow real estate group,	1.7.0
	(Name of foreign limi	ited liability company)
	_	·
77.0202	DELAWARE liction under the law of which foreign limited liability	(FEI number, if applicable)
(101120	company is organized)	(FEI number, if applicable)
	, , ,	
	NOVEMBER 15, 2002 5. (Date of Organization)	Duration: Year limited liability company will cease to
	(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
		exist or perpetual)
	Upon qualification	
	(Date first transacted business in Florida. (See sec	ctions 608.501, 608.502, and 817.155, F.S.)
·	4651 SHERIDAN STREET, SUITE 200, H	OLLYWOOD, FLORIDA 33021
	(Street address of	nrincinal office)
	(
. If lir	mited liability company is a manager-managed co	mpany, check here
	,	2
The	name and usual business addresses of the managi	ing members or managers are as follows:
		and managers are a source managers and a sou
	THEODORE STOTZER	. SOLE MEMBER
		rn.
	4651 SHERIDAN STREET, SUITE 200	
\		ing members or managers are as follows: 20 1, SOLE MEMBER AND O
	HOLLYWOOD, FLORIDA 33021	<u> </u>
		72
). Affac	ched is an original certificate of existence, no more than 90 day	ys old, duly authenticated by the official having custody of reco
		opy is not acceptable. If the certificate is in a foreign language, a
	slation of the certificate under oath of the translator must be sui	
		
1. Na	ture of business or purposes to be conducted or pr	romoted in Florida: REAL ESTATE
	Signature of a member or an arth	orized representative of a member.
	(In accordance with section 608.408(3), F.S.,	
	an affirmation under the penalties of perjury	that the facts stated herein are true.)
	THEODORE STOTZER, EXCUI	
	Typed or printed na	
	i voca ar dinited n	AIRC OF 215HCC

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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 name of the Limited Liability Company is:	
SWERDLOW REAL ESTATE GROUP, LLC	
. The name and the Florida street address of the registered agent and office are:	
NRAI SERVICES, INC.	
(Name)	,
526 EAST PARK AVENUE	
Florida street address (P.O. Box 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)

Delaware

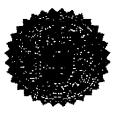
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SWERDLOW REAL ESTATE 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 FIFTEENTH DAY OF NOVEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SWERDLOW REAL ESTATE GROUP, LLC" WAS FORMED ON THE FIFTEENTH DAY OF NOVEMBER,

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



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

rriet Smith Windsor, Secretary of State
AUTHENTICATION: 209341

DATE: 11-15-02