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Suncoast Financial Group, LLC 11811 Marblehead Drive Tampa, FL 33626				
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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: SUNCOAST FINANCIAL GROUP, LLC (Name of foreign limited liability company) **NEVADA** (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) **JANUARY 3, 2003** (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) **UPON QUALIFICATION** (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 11811 MARBLEHEAD DRIVE TAMPA, FLORIDA 33626 (Street address of principal office) 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: **IHOR ALEXANDER HUMESKY** 11811 MARBLEHEAD DRIVE TAMPA, FLORIDA 33626 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 oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: FINANCIAL CONSULTING 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.)

IHOR A. HUMESKY

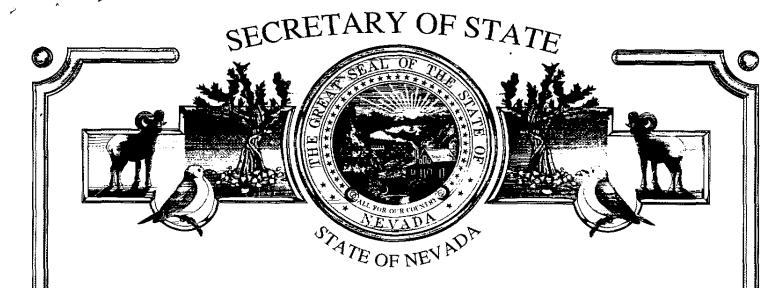
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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 I	imited Liability Company	is:		
	SUNCOAST FINAN	NCIAL GROUP, LLC		···
2. The name and the	Florida street address of th	ne registered agent and	office are:	
	EDWIN	N KAGAN		
	C	Name)	:	æ _{te} ⊖
2709 ROCKY POINT DRIVE #102			3.14	
	Florida street address	(P.O. Box <u>NOT</u> ACCEPTABL	E)	1 2 N
	TAMPA,	FL 33607		118 118
	(Cîty/S	State/Zip)		10: 42 11: 0:RIE
liability company at t registered agent and statutes relating to th	he place designated in this	certificate, I hereby acc v. I further agree to com formance of my duties, a	iply with the provisions of al and I am familiar with and	

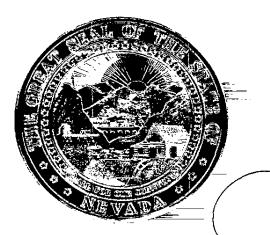
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SUNCOAST FINANCIAL GROUP**, **LLC**, as a limited-liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 13, 2003, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on January 14, 2003.

DEAN HELLER

Secretary of State

Certification Clerk