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(Requestor's Name) (Address) (Address)	800022778
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) CF - 76.2	10/06/03010530 09/26/0301009
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
CORA FOR C	DIAISION OF CONTRACT WITH
Office Use Only	



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 26, 2003

EMPIRE

TALLAHASSEE.

SUBJECT: SHINNECOCK CAPITAL, LLC

Ref. Number: W03000027654



We have received your document for SHINNECOCK CAPITAL, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$78.75 payment.

A limited liability company cannot use a FOREIGN CORPORATION application.

Please complete, sign and return the attached application for a FOREIGN LIMITED LIABILITY COMPANY with the certificate from New York.

Please note that the total amount required to file an LLC and to obtain a certified copy is \$155.00.

We are RETAINING the \$78.75 you sent. Please send an ADDITIONAL \$76.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist Letter Number: 803A0005302250H OF CORFORATION

03 OCT -3 AM D-32

Charter Number Only

9/25/03	VALID
Screna Caroll P.A.	ATLON
Address FT 33304 FT - CITY Phone 33304 (954)525-205UE	N L

BORN STEEL S

CORPORATION(S) NAME

Acknowledgment

Shinneco	ock Capi	tal. LLC	
			
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() Limited Partnership	() Annual Report	() Other	
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CT CORPORATION

September 23, 2003

Serena Carroll Shinnecock Capital LLC 1975 E. Sunrise Blvd. Ste. 770 Sunrise FL 33304 Re: Order #: 5938949 SO

Customer Reference 1: Customer Reference 2:

Dear Serena Carroll:

Per your instructions, enclosed are the following document(s) as issued by the referenced jurisdiction(s):

Shinnecock Capital LLC (NY) Certificate of Standing-Domestic New York

If you have any questions concerning this order, please contact:

Marie Isaac

Plantation Corporate Team 1

Phone: (954) 473-5503

Email: Marie_Isaac@cch-lis.com

Thank you for this opportunity to be of service.

Sincerely,

Jess J Guriale

Albany Fulfillment Team 1

155 Washington Avenue Albany, NY 12210 Tel. 518 463 2324 Fax 518 463 6533

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 RE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of foreign limited liability company) (Jurisdiction under the law of which foreign limited liability company is organized) ar limited liability company will ccase to cxist or "perpetual") Date of Organization) sections 608.501, 608.502, and 817.155, F.S.) 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: 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. 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.)

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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: Shinnecock Capital, LLC
2. The name and the Florida street address of the registered agent and office are:
Sereno Carroll, PA
1975 E. SUNTSE BIVE HTTO Florida street address (P.O. Box NOT ACCEPTABLE)
Ft Lauderdalem 33304

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.

(City/State/Zip)

\$ 100.00 Filing I

Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of New York Department of State

I hereby certify, that SHINNECOCK CAPITAL, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 08/25/1999, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.

The Biennial Statement is past due.



**

Witness my hand and the official seal of the Department of State at the City of Albany, this 22nd day of September two thousand and three.

Secretary of State

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