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Leslie M. Anderstrom 1126 South Federal Hwy #304 Ft. Lauderdale FL **333**16

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To whome it may Juncon

please file at legester my Company LMA CAPITAL Management Group UC.

Sincerely

Leone anderson

612.327-6361

FILED STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
O7 CFP -6 PM 2: 26

COVER LETTER

TO: Registration Section Division of Corporations

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:
Leslier Anderstom (Name of Person)
(Name of Person)
LMA CAPITAL Management troup LC & Firm/Company)
1126 South Federal Huy # 304 (Address)
Ft Lywerdule FL 33316 (City/State and Zip Code)
For further information concerning this matter, please call:
Leslie Anderstrow at (61d) 327-636 (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\frac{1}{2}\$\$125.00 Filing Fee \$\bigcup\$

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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. LMA CADITAL MANAGEMENT LIVOUD 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.")
2. NWAAA (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. Object of Organization) 5. Object of Organization 6. Object of Organization 7. Object of Organization 6. Object of Organization 7. Object of Organization 7. Object of Organization 7. Object of Organization 7. Object of Organization 8. Object of Organization 9. Object of Organiz
6. NA (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
·
7. LMA CapiTAL Management Group LLC
1126 South Federal Hwy # 304 PT Lituderdale FC (Street Address of Principal Office) 33316
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:
Leolie Andorstrum
1126 South Federal Hoy #304
FT [Audendale FL 33316
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:
Real Estate Truesting.
Signe anguit
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.)
Leslie Anderstrom 914107
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: LMA COUNTAL Management broup LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	OT SEP
2. The name and the Florida street address of the registered agent and office are: Leslier Anders M (Name)	F CORPORATIONS F CORPORATIONS F CORPORATIONS
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
FT Lyuderdale FL 33316 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.

Valu Sharan (Signature)

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

SECRETARY OF STATE



SECRETARY OF STATE HS DIVISION OF CORPORATIONS

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, LMA CAPITAL MANAGEMENT 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 August 7, 2007, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20070810-1691
You may verify this electronic certificate
online at http://secretaryofstate.biz/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 10, 2007.

ROSS MILLER Secretary of State