# M08000000262

(Re	questor's Name)			
(Ad	dress)			
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CRETARY OF STATE ON OF CORPORATIONS

J. BRYAN

JAN 16 2008

**EXAMINER** 

#### **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	ECT: SWD Real Estate Solutions (Name of Lim	ited Liability Company)		
Florid	· · · · · · · · · · · · · · · · · · ·	ability Company for Authorization to Transac abmitted to register the above referenced fore		
Please	return all correspondence concerning this m	natter to the following:		
	Karen Fleming, Paralegal		<del></del>	
	(Na	ime of Person)		
	Estill and Long, LLC		08 JÁ	SECR DIVISION
	rm/Company)	N 15 PM	957	
10354 W. Chatfield Ave., Suite 201				RY OF STI CORPORA
		(Address)	2:27	
	Littleton, CO 80127		<b>-</b>	<del>2</del> 5
	(City/St	ate and Zip Code)		
For fu	rther information concerning this matter, ple	ease call:		
	Karen Fleming	at ( 720 ) 922-1120		
	(Name of Person)	(Area Code & Daytime Telephone Num	ber)	
	MAILING ADDRESS:	STREET ADDRESS:		
		Division of Corporations		
		Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclo	sed is a check for the following amount:  \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$130.00 Filing Fee}} \& \text{Certificate of}\$	✓\$155.00 Filing Fee & □\$160.00 Filing Fee, Status Certified Copy of Status		ficate ified 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SWD Real Estate Solutions, LLC (Name of Foreign Limited Liability Company; must include	
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
Nevada 3	26-1590579
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 12/6/07 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	NVISION SECTION SECTIO
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	ida, if prior to registration.) o determine penalty liability)
7. 2731 Executive Park Drive, Suite 4	5 CX E
Weston, FL 33331	POR 2
(Street Address of	f Principal Office)
8. If limited liability company is a manager-managed c	
9. The name and usual business addresses of the manag	ging members or managers are as follows:
Silver State Corporate Services, Inc., 4	4535 W. Sahara Avenue, Suite 200,
Las Vegas, NV 89102.	
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submi	tted.)
11. Nature of business or purposes to be conducted or p	promoted in Florida: Real Estate
Signature of a member or an auth (In accordance with section 608.408(3), P.S an affirmation under the penalties of perjur Stephanie F. Long, Esq	y that the facts stated herein are true.)

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 Liabili	ity Compa	any is:	
SWD Real Es	state Solutions, LLC			· · · · · · · · · · · · · · · · · · ·
If name unav	vailable, the alternate n	ame to be	e used in the state of Florida is:	
2. The name	and the Florida street	address (	of the registered agent and office are:	80 11/10 11/10
	NRAI Services, Inc.			JA
			(Name)	DE JAN 15 PM 2: 2
	2731 Executive Part	k Drive, S	uite 4	RP OF
			ress (P.O. Box <u>NOT</u> ACCEPTABLE)	2: 27
	Weston		FI, 33331	o,
			City/State/Zip	
liability comp agent and agr relating to the	oany at the place design ree to act in this capaci e proper and complete p f my position as register	nated in th ity. I furth performai	o accept service of process for the abovais certificate, I hereby accept the appoin ther agree to comply with the provisions nce of my duties, and I am familiar with as provided for in Chapter 608, Florid	intment as registered of all statutes a and accept the
By: Army Amy Purdy, A	(Signature) ssistant Secretary		·	
	S	§ 100.00	Filing Fee for Application	
	\$		Designation of Registered Agent	
	\$	30.00	Certified Copy (optional)	

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



## 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, SWD REAL ESTATE SOLUTIONS, 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 December 6, 2007, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20080108-1223
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 January 8, 2008.

ROSS MILLER Secretary of State