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SECRE MARY OF STATE ALLAHASSEE, FLORID,

T

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Amzak Capital Managen	nent, LLC
	Limited Liability Company)
	Liability Company for Authorization to Transact Business in a submitted to register the above referenced foreign limited a
Please return all correspondence concerning thi	s matter to the following:
Gerald J Kazma	
	Name of Person)
Amzak International Inc.	·
	Firm/Company)
11555 Heron Bay Blvd.,	Suite 301
	(Address)
Coral Springs, FL 33076	
. (City	/State and Zip Code)
For further information concerning this matter,	please call:
Mike Dalton	at (630) 245-0051
(Name of Person)	(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: [] \$125.00 Filing Fee	<u> </u>

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
I. Amzak Capital Management, 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 attaconsent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	
2. Nevada 3. 20-4485150	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized)	e)
4. February 28, 2006 5. Perpetual	
(Date of Organization) (Duration: Year limited liability comparation exist or "perpetual")	ny will cease to
6(Date first transacted business in Florida, if prior to registration.)	
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
_{7.} 11555 Heron Bay Blvd., Suite 301	
Coral Springs, FL 33076	
(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 fo	ollows:
Gerald J Kazma; 11555 Heron Bay Blvd.; Suite 301, Coral Spring	s, FL 33076
Michael D Kazma; 11555 Heron Bay Blvd.; Suite 301, Coral Spring	ns, FL 33076
	<u></u>
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official hav	
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fore translation of the certificate under oath of the translator must be submitted.)	sign language, a
·	
11. Nature of business or purposes to be conducted or promoted in Florida: Any and	
all lawful business	7. SEE: .
X	AN E
Signature of a member or an authorized representative of a member.	L.A.1
(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.)	
Michael D Kazma	
Typed or printed name of signee	om 5

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 t	ne Limited Liability Company is:
Amzak Capit	tal Management, LLC.
If name unavailal	ble, the alternate name to be used in the state of Florida is:
2. The name and	the Florida street address of the registered agent and office are:
ļ	Michael D Kazma
_	(Name)
	11555 Heron Bay Blvd., Suite 301
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)
· <u>(</u>	Coral Springs, FL City/State/Zip
	Спулоция гір

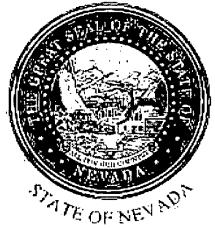
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

(Signature)

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

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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, **AMZAK CAPITAL MANAGEMENT**, **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 February 28, 2006, and is in good standing in this state.



Electronic Certificate
Certificate Number: C20080430-2585
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 April 30, 2008.

ROSS MILLER Secretary of State SECRETARY OF STATE