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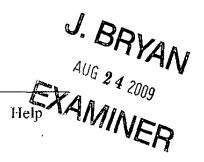
ORIDA/FOREIGN LIMITED LIABILITY CO.

SAGRAN LLC

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Page Count	03	
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Electronic Filing Menu

Corporate Filing Menu



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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: **SAGRAN LLC** (Name of Foreign Limited Liability Company) **STATE OF DELAWARE** 13-6858977 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 07/17/2009 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") **UPON FILING** (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 185 NW SPANISH RIVER BLVD #100 **BOCA RATON** 33431 (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: KINSAN MANAGEMENT CORP 185 NW SPANISH RIVER BLVD #100 **BOCA RATON** FL. 33431

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 eath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

ANY LAWFUL BUSINESS FOR WHICH A LLC MAY BE ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, INCLUDING, BUT NOT LIMITED TO, DEALING IN ALL MANNER AND NATURE WITH PROPERTIES OF ALL KINDS.

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.)

ANDREW M. SCHREIER, VP OF MANAGER

Typed or printed name of signee

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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.

	GRAN LLC		,
2. The name and the Florida street address of	the registered a	gent and office are:	09 AUG SECRET
National Corpo	orate Research,	Ltd., Inc.	SS 2 F
(Name)			
515 Ea	ast Park Avenue		F STU
Florida Street Address (P.O. Box NOT ACCEPTABLE)		RIGA	
Talłahassee	FL	32301	
	City/State/Zip		
Having been named as registered agent and to a liability company at the place designated in this agent and agree to act in this capacity. I further relating to the proper and complete performance obligations of my position as registered agent as	certificate, I her ragree to compl e of my duties, a	reby accept the appoi y with the provisions nd I am familiar with	intment as registered of all statutes and accept the
Signature) (Signature) (Signature) (Signature) (Signature)	Genetary		

\$ 25.00 \$ 30.00

5.00

Designation of Registered Agent

Certified Copy (optional)
Certificate of Status (optional)

(((H090001860873))) Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAGRAN LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF AUGUST, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAGRAN LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

Joffrey W. Bullock, Secretary of State TION: 7485762

DATE: 08-20-09