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EXAMINER

COVER LETTER

TO:

	Registration Section Division of Corporations	
SUBJEC		
	Name of Limited Liability Company	
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida e, and check are submitted to register the above referenced foreign limited liability company to transact bus	
Please ret	turn all correspondence concerning this matter to the following:	DIVISION SEC
	Michael Paolucci	台 點。
	Name of Person	NASION OF STATE OF ST
	Select Strategies - Brokerage, LLC	ORPORETIONS
	Firm/Company	9.
	4450 Eastgate Blvd., Suite 1000	5
	Address	
	Cincinnati Ohio 45045	
	Cincinnati, Ohio 45245 City/State and Zip Code	·
	City/state and Zip Code	
	mpaolucci@selectstrat.com	
	E-mail address: (to be used for future annual report notification)	-
For furthe	er information concerning this matter, please call:	
_	Michael Paolucci at (513) 332-9957 Name of Person Area Code & Daytime Telephone Number	
	Name of reison Area Code & Daytime Telephone Number	
	MAILING ADDRESS: STREET ADDRESS:	
	Division of Corporations Registration Section Division of Corporations Registration Section	
	P.O. Box 6327 Clifton Building	
7	Tallahassee, FL 32314 2661 Executive Center Circle	
	Tallahassee, FL 32301	
Enclose	ed is a check for the following amount:	
Ε	\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & }\sum \text{\$155.00 Filing Fee & }\sum \text{\$160.00 Filing Fee, of Status & Certified Copy} \text{of Status & Certified 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: Select Strategies- Brokerage, 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.") Kentucky 20-3003300 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) February 10, 2005 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") Not applicable (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 4450 Eastgate Blvd., Suite 1000 Cincinnati, Ohio 45245 (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: Michael Paolucci, 4450 Eastgate Blvd., Suite 1000, Cincinnati, Ohio 45245 Andrew Modrall, 725 Alexandria Pike, Ft. Thomas, Kentucky 41075 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: Commercial real estate management and leasing 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.) Michael Paolucci

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:
Select Strategies - Brokerage, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Mary Lou Davis
(Name)
2425 Abbey Avenue
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Orlando, Florida 32833
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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

9/16/2009

Commonwealth of Kentucky Trey Grayson, Secretary of State

Division of Corporations Business Filings P. O. Box 718 Frankfort, KY 40602 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication Number: 85658

Jurisdiction: florida

Visit http://apps.sos.ky.gov/business/obdb/certyalidate.aspx to authenticate this certificate.

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

SELECT STRATEGIES - BROKERAGE, LLC

is a limited liability company duly organized and existing under KRS Chapter 275, whose date of organization is Fébruary 10, 2005.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 275.190 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 16th day of September, 2009.



Tn62

Trey Grayson Secretary of State Commonwealth of Kentucky 85658/0605764