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SECRETARY OF STATE
TALLAHASSEE, FEORIO.

J. BRYAN

OCT - 5 2009

EXAMINER

COVER LETTER

SUBJECT:	Pita	el, LLC.
SUBJECT	, , ,	Name of Limited Liability Company
		Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida.
Please return al	ll correspondence concerning the	nis matter to the following:
	<u>Daniel</u>	Stuzin Name of Person
		ES 9 TT
	SF Part.	mer Mortgage LLC. Firm/Company J. J. J.
		Firm/Company U
	800 Dougla	Firm/Company Address Mo/Fgage 22C. Firm/Company Spr. 5 Address Address
	•	Address PET 5
	Coral G	City/State and Zip Code
		City/State and Zip Code
		e belisouth net
	E-mail addr	ess: (to be used for future annual report notification)
For further info	ormation concerning this matter	, please call:
)	Daniel Stuzin	at (305) 774 0454
	Name of Person	Area Code & Daytime Telephone Number
Divisi	LING ADDRESS: on of Corporations	STREET ADDRESS: Division of Corporations
	ration Section Box 6327	Registration Section Clifton Building
	assee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a	Check for the following a	amount:
_/		_
 \$12		Filing Fee & \$\sum \$155.00\$ Filing Fee & \$\sum \$160.00\$ Filing Fee, Certificate cate of Status & Certified Copy 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: Pitzel, LLC.

n 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.") company is organized) (Date of Organization) //- 14 - 06
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) Coral Gablee, P2. 33134

(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here | V 9. The name and usual business addresses of the managing members or managers are as follows SF Partners Mortgage, LCC. 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 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.) 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:	
PItzel, 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:	Π
Dancel Stuzin Par 15 15 15 15 15 15 15 15 15 15 15 15 15	
800 Douglas Rd. N. Twee Ste 500 Florida Street Address (P.O. Box NOT ACCEPTABLE)	O
Coral Gables FL 33134 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)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PITZEL, 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2009.

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AUTHENTICATION: 7536296

DATE: 09-18-09

You may verify this certificate online at corp.delaware.gov/authver.shtml