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SECRETARY OF STATE

J. BRYAN

APR 2 7 2011

**EXAMINER** 

#### **COVER LETTER**

SUBJECT: _	SAFE HARBOR HOLDING		
	ì	Name of Limited Liability Company	
		iability Company for Authorization to Transact Busine above referenced foreign limited liability company to	
Please return a	all correspondence concerning this	matter to the following:	
	Derek S. Lemkin		
		Name of Person	
	FREUND & BRACKEY,	LLP	
		Firm/Company	
	427 NORTH CAMDEN	DR	SE 3
		Address	翌月
	BEVERLY HILLS, CA 90	0210	ARY PARTY
		City/State and Zip Code	APR 26 PH 1: 38 CRETARY OF STATE
	E-mail address	s: (to be used for future annual report notification)	<del>SM</del>
For further infe	formation concerning this matter, p	elease call:	
DER	REK S. LEMKIN	310 247-2165	
	Name of Person	Area Code & Daytime Telephone Number	
Divis Regis P.O. I	LING ADDRESS: sion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	a check for the following am .00 Filing Fee \$\int_{\text{Certificate of}}\$	g Fee & \$155.00 Filing Fee & \$160.00 Filing	g Fee, Certificate Pertified 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

	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE ST. SAFE HARBOR HOLDINGS, LLC	ATE OF FLORIDA:
1	(Name of Foreign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or "LLC.")
cons	name unavailable, enter alternate name adopted for the purpose on sent of the managers or managing members adopting the alternate ompany," "L.L.C," "LLC.")	
2. <sup>\</sup>	٠,٠	20-8356107
(J	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4	2/08/2007 5.	PERPETUAL "
7	(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	1/01/2011	a, if prior to registration.)
	(Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	
<b>7.</b> .	333 N. E. 24th Street, Suite 309	SSEE B III
Į	Miami, FL 33137	FEST
	(Street Address of	Principal Office)
8.	If limited liability company is a manager-managed co	mpany, check here
9.	The name and usual business addresses of the manag	ing members or managers are as follows:
	JAN OTTO	
	c/o FREUND & BRACKEY, LLP	
	427 NORTH CAMDEN DRIVE, BEVERLY HILLS	S, CA 90210
the j	). Attached is an original certificate of existence, no more than 90 day e jurisdiction under the law of which it is organized. (A photocopy is anslation of the certificate under oath of the translator must be submitt	not acceptable. If the certificate is in a foreign language, a ed.)
11.	1. Nature of business or purposes to be conducted or p	romoted in Florida: Any and all lawful purpose
	MIN VI	•
	Signature of a member or an author	prized representative of a member.
	(In accordance with section 608.408(3), F.S., the execution	_

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Derek S. Lemkin

### 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 SAFE HARBOR HOLDIN		
If unavailable, the alternate	to be used in the state of Florida is:	To -
2. The name and the Florida street address of the registered agent and office are:		FILI INPR 26 ECRETAR ECRETAR
CT Corpora	ation System	FF R
<del></del>	(Name)	HELOR
1200 South	Pine Island Road	SE SE
	_ <b></b>	
Plantation	<sub>FL</sub> 33324	
	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.

(Signature)

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

## STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

# Safe Harbor Holdings, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **September 11, 2006**, comply with all applicable requirements of this office. This entity has been assigned entity identification number **2006-000521316**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 19th day of April, 2011 at 3:48 PM. This certificate is assigned 009794536.



May Maffield Secretary of State



Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.