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SECRETARY OF STATE

H- CHORD

T. HAMPTON NOV 8 1 2011 EXAMINER

COVER LETTER

	TO:	Registration Section Division of Corporations
и. По	SUBJE	CT: Sky Development Tuternationa LLC
. 15	The enc	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ee, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
	Please re	eturn all correspondence concerning this matter to the following:
		Shmuel Newman Name of Person
		sky Development International, LLC Firm/Company
		2999 NE 191 Street PH2 Address
		Aventuna FL 33/BO City/State and Zip Code
		E-mail address: (to be used for future annual report notification)
	For furth	ner information concerning this matter, please call:
		Shmue Neuman at (954) 701-6665 Name of Person Area Code & Daytime Telephone Number
		MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
		ed is a check for the following amount: \$125.00 Filing Fee \$\frac{1}{2}\$



RECEIVED

11 NOV 18 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 25, 2011

SHMUEL NEULMAN 2999 NE 191ST ST PH2 AVENTURA, FL 33180

SUBJECT: SKY DEVELOPMENT INTERNATIONAL, LLC

Ref. Number: W11000054622

We have received your document for SKY DEVELOPMENT INTERNATIONAL, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 611A00024376

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:
1. Sky Development Tinternational 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.")
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. 45-1015141 (FEI number, if applicable)
4. 3/18/2011 5. (Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7
2999 NE 191 street PHZ Aventura, FL 33180 ET
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:
shmuel Newman 2999 NE 1910+ Street PHZ Aventura, FL 33180
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 ranslation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
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. 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.)
Typed or printed name of signee
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 Lir	nited Liability Compa	any is:		
**************************************	Sky De	velopment	International	, LLC
If unavailable, the alter	nate to be used in the	state of Florida	a is:	
2. The name and the F	lorida street address o	of the registered	l agent and office are:	
	Shn	nuel Newy (Name)	Man	_
	299 Florida Street Addr	A NE 1918 ress (P.O. Box NC	Street Ph 2 DT ACCEPTABLE)	
	Av	City/State/Zip	33180	
Having been named as r liability company at the agent and agree to act it relating to the proper ar obligations of my positio	place designated in the n this capacity Afterna nd complete parforma	is certificate, I had agree to com ace of my duties, as provided for	hereby accept the appoin ply with the provisions o , and I am familiar with	ntment as registered of all statutes and accept the
	\$ 100.00 \$ 25.00	Filing Fee for	Application of Registered Agent	2011 NOV SECRETA

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

\$ 5.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "SKY DEVELOPMENT INTERNATIONAL, 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 SEVENTEENTH DAY OF OCTOBER, A.D.

2011.

4956062 8300

111108538

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 9097629

DATE: 10-17-11

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