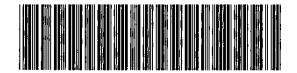
11200006516

(Re	equestor's Name)	
(Ad	idress)	
(Ad	dress)	
· · · · · · · · · · · · · · · · · · ·	u (Chaha (Zin ID) a an	- 40
(Cit	y/State/Zip/Phone	₽#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
·	_	





600241397706

11/06/12--01007--005 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00 **125.00

T. CLIME
NOV 2 6 2012
EXAMINATION



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2012

JASON ALLEN P.O. BOX 813451 SMYRNA, GA 30081

SUBJECT: MIAMI 1 REALTY, LLC Ref. Number: W12000056567

We have received your document for MIAMI 1 REALTY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must contain the names and street addresses of the members or managers of the limited liability company.

Please return 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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 912A00027062

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Miami 1 Realty, LLC			
	of Limited Liability Company		
	ty Company for Authorization to Transact Business in Florida we referenced foreign limited liability company to transact bus		
Please return all correspondence concerning this matter	r to the following:		
Jason Z. Allen			
	Name of Person		
Miami 1 Realty, LLC			
	Firm/Company		
P.O. Box 813451			
	Address		
Smyrna, GA 30081			
	City/State and Zip Code		
jasonzallen@yahoo.con	n .		
E-mail address: (to b	be used for future annual report notification)	Mary II	
For further information concerning this matter, please call:		Ž	
Jason Z. Allen	_{at (} 678 ₎ 234-9808	2	, * n.
Name of Person	Area Code & Daytime Telephone Number	7	
Division of Corporations	STREET ADDRESS: Division of Corporations Registration Section	3: TO	in and
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 1661 Executive Center Circle Fallahassee, FL 32301		
Enclosed is a check for the following amount: [\$\sum_{\text{\$\frac{1}{2}}}\$\$ \$125.00 Filing Fee & Certificate of Status	& \$\int\\$155.00 Filing Fee & \$\int\\$160.00 Filing Fee, Certific		

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;

I. Miami 1 Realty, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Li Company," "L.L.C," "LLC.")	
2. Georgia (Jurisdiction under the law of which foreign limited liability company is organized) 3. H6-131158 (FEI number, if applicable)	_
4. 10/29/2012 (Date of Organization) 5. PEXPETUAL (Duration: Year limited liability company will cease exist or "perpetual")	to
6. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 3571 Herren Dr. SW, Smyrna, GA 30082	
27C2 #5	
(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:	:
JASON Z. ALLEN 5	
3571 HERREN DR. SW	
SMYRNA, GA 30082	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, 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 Brokerag	<u>ge</u>
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.) Jason Zachery Allen	

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:		
Miami 1 Realty, LL	С		
If unavailable, the alternate t	to be used in the state of Florida is:		
2. The name and the Florida	street address of the registered agent and office are:		
Northwest Registered Agent LLC		المالية المسلم المسلم المالية المالية المالية المالية المالي	
	(Name)	Trans.	Z 1104
3030 N. R	Rocky Point Dr. STE 150A	22	PO
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	194	3
Tampa	_{FL} 33607		ુ: -0
	City/State/Zip	2.	الميا

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.

Dan Keen-Manager
(Signature)

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

Control No. 12085669

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

MIAMI 1 REALTY, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 10/29/2012 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 1st day of November, 2012

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 9400153-1 Reference: Verify this certificate online at http://corp.sos/state.ga.us/corp/soskb/verify.asp