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#### **COVER LETTER**

TO:

Registration Section

	1	Name of Limited Liability Company	
he enclosed ". Existence, and	Application by Foreign Limited L check are submitted to register th	iability Company for Authorization to Tre above referenced foreign limited liability	ransact Business in Florida," Certificate of ty company to transact business in Florida.
lease return al	I correspondence concerning this	matter to the following:	
	Michael D. Royal		
		Name of Person	
	Pareto Asset Managemen	t, a series of Pareto Group LLC, a l	Delaware Series LLC
		Firm/Company	
	59 King St., Apt. A		
		Address	
	Charleston, S.C. 2940	l	
		City/State and Zip Code	<del></del>
	michael@pareto.gr		
	E-mail address	: (to be used for future annual report noti	fication)
or further info	rmation concerning this matter, p	lease call:	
Doni	na Oostdyk	at (843 ) 202-	0604
	Name of Person	Area Code & Daytime Telephone	e Number
Divisio Regist P.O. B	ING ADDRESS: on of Corporations ration Section iox 6327 assee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	
	,	Tallahassee, FL 32301	
inclosed is a	check for the following am 0 Filing Fee S130.00 Filing Certificate of S	Fee & \$155.00 Filing Fee & \$	160.00 Filing Fee, Certificate 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.

1. Sycamore Property Group, 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 we consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	
2. South Carolina (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. 09/14/2012  (Date of Organization)  5. perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")	
6. Upon vigistration  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<b>i</b>
7. 59 King St., Apt A	730
Charleston, S.C. 29401 (Street Address of Principal Office)	도 모
8. If limited liability company is a manager-managed company, check here	ዛ 2፡
9. The name and usual business addresses of the managing members or managers are as follows: Amager Michael D. Royal Manager	Φ
59 King St., Apt A	
Charleston, S.C. 29401	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recording 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 eath of the translator must be submitted.)	dsin
1. Nature of business or purposes to be conducted or promoted in Florida: asset management	
Signature of a member of 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

Michael D. Royal

### 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 I	imited Liability Company	y is:	
Sycamore Pro	perty Group, LLC	) •	
If unavailable, the al	ernate to be used in the st	ate of Florída is:	
2. The name and the	Florida street address of t	the registered agent and office	e are:
inCo	rp Services, Inc.		
<del></del> -		(Name)	
178	38 67th Court North		
	Florida Street Address	(P.O. Box NOT ACCEPTABLE)	
Lox	ahatchee	<sub>FL</sub> 33470	
		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

Incoro Servicie, Inc.

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## The State of South Carolina



## Office of Secretary of State Mark Hammond

#### **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

SYCAMORE PROPERTY GROUP, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on September 14th, 2012, with a duration that is until December 31st, 2099, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 21st day of November, 2012.

Mark Hammond, Secretary of State