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(Re	equestor's Name)	
. (Ac	ddress)	
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(Ci	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(Bc	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Photo Copy			_	Annual Report / Reinstatement
Certificate of Good Standing			_	Cert. Copy
Certificate of Status			_	Photo Copy
Certificate of Fictitious Name				Certificate of Good Standing
Corp Record Search			_	Certificate of Status
Officer Search			_	Certificate of Fictitious Name
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	Walk-In			Courier

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Camden Capital, LLC				
Name of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
Please return all correspondence concerning this matter to the following:				
Richard Bursek				
Name of Person				
Camden Capital, LLC				
Firm/Company				
11780 US HWY One, Suite 303				
Address				
North Palm Beach, FL 33408				
City/State and Zip Code				
rbursek@camdencapital.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Richard Bursek _{at 561} 693-3255				
Name of Person Area Code & Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				

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:

	Camden Capital, LLC (Name of Foreign Limited Liability Company; must include			C.")	-	
co	f name unavailable, enter alternate name adopted for the purpose onsent of the managers or managing members adopting the altern ompany," "L.L.C," "LLC.")	sc o	of transacting business in Florida and attach a co e name. The alternate name must include "Limi	py of the v	written ty	
2.	Delaware 3	3	57-1190630			
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		•	
4	10/28/2003	.	Perpetual			
₹.	(Date of Organization)	٠, -	(Duration: Year limited liability company will exist or "perpetual")	cease to	•	
6.	N/A			26	~9	
٠.	(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.)	orida . to	a, if prior to registration.) determine penalty liability)	E G	2013	
7.	11780 US HWY One, Suite 303				NUL	<u> </u>
•	North Palm Beach, FL 33408			- 33 7	17	E
	(Street Address o	of F	rincipal Office)	<u> </u>	圣	Ò
8.	If limited liability company is a manager-managed of	COI	mpany, check here 🔳	ATE	9: 42	
9.	The name and usual business addresses of the mana	agiı	ng members or managers are as follows			
	John Krambeer, 2301 Rosecrans Aven	านย	e, Suite 2110, El Segundo CA	90245		
	Gary Nicklaus, 11780 U.S. Highway One,	e, S	Suite 500, North Palm Beach FL	33408		
the tra	Attached is an original certificate of existence, no more than 90 de jurisdiction under the law of which it is organized. (A photocopy instation of the certificate under oath of the translator must be submit. Nature of business or purposes to be conducted or purposes.	oy is mitt	not acceptable. If the certificate is in a foreign la red.)		cords i	n
	Wealth management services					
	flu la	utior e. I a	am aware that any false information submitted it	n a	•	

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: Camden Capital, 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:	
Your Capital Connection, Inc.	SECRETALLY
(Name)	
417 E. Virginia Street, Suite 1	SEE OF THE
Florida Street Address (P.O. Box NOT ACCEPTABLE)	F STU
Tallahassee _{FL} 32303	ATE IRIDA
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 "CAMDEN CAPITAL, 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 THIRTEENTH DAY OF JUNE, A.D. 2013.

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AUTHENTICATION: 0508560

DATE: 06-13-13