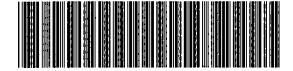
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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### COVER LETTER

TO:

Registration Section .

Division of Corporations
SUBJECT: SMK Business Center, LLC  Name of Limited Liability Company
Name of Emilied 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:
Barbara L. Moore
Name of Person
SMK Business Center, LLC
Firm/Company
2011 Queen Street
Address
Portsmouth, VA 23704
City/State and Zip Code
BLMoore@SMKBizctr.com  F-mail address: (to be used for future annual report notification)
Contract Con
For further information concerning this matter, please call:
Barbara L. Moore (757) 673-1010
Name of Contact Person Area Code Daytime Telephone Numbér :
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle
Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc
Certificate of Status  Certified Copy  Of Status & Certified Copy

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L SMK Business Center, 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. The alternate Liability Company," "L.L.C," or "LLC,")	name must include "Limited			
<sub>2.</sub> Virginia <sub>3.</sub> 46-3114143				
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if appli	cable)			
4				
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)				
5. 2011 Queen Street				
Portsmouth, Virginia 23704				
(Street Address of Principal Office)				
6. 2011 Queen Street				
Portsmouth, Virginia 23704	AR PR			
(Mailing Address)	ME OF			
7. The name, title or capacity and address of the person(s) who has/have authority to n	nanage is/are:			
Barbara L. Moore, Managing Member				
8. Attached is an original certificate of existence, no more than 90 days old, duly auther				
having custody of records in the juri diction under the law of which it is organized. (A				
acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	r oath of the translator			
11 Carrare IN/com				
Signature of an authorized person	<del></del>			
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjuran aware that any false information submitted in a document to the Department of State constitutes a third degree felony as providing				
Barbara I Moore				

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Co Siness Center, I				
If unavailable,	the alternate to be used in	n the state of Florida is:			
2. The name a	nd the Florida street addr	ess of the registered agent and office are:	n ha Galland Andread Strong (1)	2014	
				7	
	17888 67th Co	(Name) Ourt North	EASSEE	APR 28 F	Services Services
	Florida Street	t Address (P.O. Box NOT ACCEPTABLE)	15 S 17	PM 1:	Constant Constant
	Loxahatchee	FL 33470		1: 33	, realize
		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 605, Florida Statutes.

IN Corp Services, NC.

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

# Commonhoealth of Hirginia



# State Corporation Commission

#### CERTIFICATE OF FACT

### I Certify the Following from the Records of the Commission:

That SMK Business Center LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is June 16, 2013; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

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Signed and Sealed at Richmond on this Date: April 21, 2014



Joel H. Peck, Clerk of the Commission