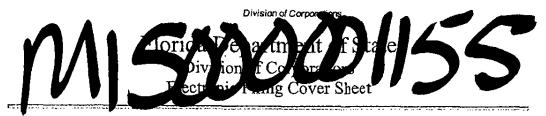
2/12/2015



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150000369743)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : NORTHWEST REGISTERED AGENT LLC

Account Number : I20090000081 Phone : (509)768-2249

Fax Number : (855)330-1010

2015 FEB 12 AM 9: 24

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: PROCESSING@LLCAGENT.COM

## Foreign Limited Liability Company MIAMI SHORE LLC

RECEIVED 5 FEB 12 AN 10: 00 5 GONHEROLAN 9 SEAN OF COMPERCIAL

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

FEB'13 2015 BRUCE

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### 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:

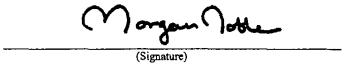
1. MIAMI SHORE LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. NV (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)
4.
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 8 CHIPPEWA COURT, HOLMDEL NJ 07733
25 No. 10
(Street Address of Principal Office)
6. 8 CHIPPEWA COURT, HOLMDEL NJ 07733
724 100
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
ARUNA VIRADIAMANAGER
ARUNA VIRADIAWANAGER
8 CHIPPEWA COURT, HOLMDEL NJ 07733
8. 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 translation of the certificate under oath of the translator must be submitted)  Signature of an authorized person  (In accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, 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.)
Aruna Viradia
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.

1. The name of the Limited Liability Company is:		
MIAMI SHORE 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:	2015	
Northwest Registered Agent LLC	FEB	77
(Name)	312	Anest one
3030 N. Rocky Point Dr., STE 150A	A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ب	
Tampa 33607	24	
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.



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

# SECRETARY OF STATE



#### CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MIAMI SHORE LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 7, 2014, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20141230-4226
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 30, 2014.

ROSS MILLER Secretary of State