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COVER LETTER

TO: Registration Section A Division of Corporations
SUBJECT: SOUTH PORT STATION FINANCIAC MANAGEMENT, LLE 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:
MICHAEL S JELDEMINE CA 1PFS Name of Person
SOUTHPONT STATION FINANCIAL MANAGEMENT, LL
7667 MARTINO CIRCUE
City/State and Zip Code
JELLO & SOUTH FORT STATION. NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MICHAEL S. JELDEMINE at (203) 254-2333 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a plack for the following amount: 12 \$125.00 Filing Fee \(\begin{array}{c} \Box \text{130.00 Filing Fee} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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. SOUTH PONT STATION TIMANCIAL MANAGEMENT, LAC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. CONNECTION: (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-141999748 (FEI number, if applicable)
4. A FIER ACCEPTANCE OF REGISTRATION (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 368 CENTER ST
SOUTH PORT CT 06890-1432. (Street Address of Principal Office)
6_ 7667 MANTINO CINCLE & F
MAPLES FL 34112 (Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: MICHAEL S. JELORMINE
Office Address: 766 MANTINO GRLE
NAPLES , Florida 34/12-2870 (City) , Florida (Zip code)
Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: MICHAEL S. JELORIMECH HES
1667 MANTINO CIRCLE
NAPLES FL 34/10-2870
9. Attached is a 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. (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 ATTACHAO
Signature of an authorized person ATTACHAO
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.
MICHAEL S. JELORMINE PAIPES Typed or printed name of signee

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

SOUTHPORT STATION FINANCIAL MANAGEMENT, LLC

a domestic limited liability company, were filed in this office on November 26, 2007.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: August 24, 2015

Business ID: 0919911 Standard Certificate Number: 2015225078001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov