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OCT 0 5 2016 S. YOUNG SECRETARY OF STETES

COVER LETTER

TO:	Registration Section Division of Corporation	ns			¥.	
SUBJI	Shoma Asset Mana	gement, LLC				
30131		Name of	Limited Liability	Company		_
The en Exister	closed "Application by For ice, and check are submitte	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tra ted liabilit	ansact Business in Florida, y company to transact busi	" Certificate of ness in Florida
Please	return all correspondence	concerning this matter to the	following:			
		M	Masoud Shojaee			
		N	lame of Person	<u></u>		_
	Shoma Asset Management, LLC					
	Firm/Company					-
		3470 NW 8	2nd Avenue, Suite	988		
	Address					
	Doral, FL 33122					16 OCT -4 PH 2: 50
	City/State and Zip Code mshojaee@shomagroup.com					O THE
						i Service
		E-mail address: (to be use	d for future annua	report not	tification)	7 77
For furt	her information concerning	g this matter, please call:				50
	Frank Silva, Esq.		786 at (437	-8658	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Name o	f Contact Person	Area Code	Day	time Telephone Number	-
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding ceutive Center Circle see, FL 32301	
Enclose	d is a check for the follow \$\square\$ \$125.00 Filing Fee	ing amount: \$\Boxed{\Boxes} \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filit Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co	

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. Shoma Asset Managem	· ·		
(Name of Fore	eign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or "LLC	.")
(If name unavailable, enter al Liability Company," "L.L.C."	ternate name adopted for the purpose of transa" or "LLC.")	acting business in Florida. The alternate name mus	st include "Limited
2 Delaware	, , , , , , , , , , , , , , , , , , ,	1-3994549	
	of which foreign limited liability	(FEI number, if applicable)	
4. N/A			
	(Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.S	ida, if prior to registration.) . to determine penalty liability)	
5. 3470 NW 82nd Avenu	e, Suite 988		
Doral, FL 33122			
	(Street Address of Principal C	Office)	
6. 3470 NW 82nd Avenue	e, Suite 988		
Doral, FL 33122			京
	(Mailing Address)		9 27
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT_acceptable)	7 8
Name:	Frank Silva, Esq.		÷ SFE
Office Address:	3470 NW 82nd Avenue, Suite 988		16 OCT -4 PH 2: 50
	Doral	, Florida 33122	,;, ,;,
Registered agent's accept	(City)	(Zip code)	0
designated in this applicate to complywith the provision	tion, I hereby accept the appointment of	ogess for the above stated limited liability co registered agent and agree to act in this cap nd complete performance of my duties, and	acity. I further agree
	Registered agent	's signature)	
8. The name, title or capa	icity and address of the person(s) who has	have authority to manage is/are:	
Masoud Shojaee: 3470 N	W 82nd Avenue, Suite 988, Doral, FL 33	122 - Director and Chairman,	
Edgar Monserratt: 301 Ali	meria Avenue, Suite 310, Coral Gables, F	L 33134 - CEO and Manager,	_ _
 Attached is a certificate jurisdiction under the law of the translator must be su 	of which it is organized. (If the certificate	aly autherlicated by the official having custod is in a foreign language, a translation of the c	ly of records in the ertificate under oath
	Signature of an auth	orized person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) the Department of State constitutes a thir	b), Florida Statutes. I am aware that any false degree felony as provided for in s.817.155,	information F.S.
	Masoud Sho	ojaee	
	Typed or printed nan	ne of signee	

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SHOMA ASSET MANAGEMENT 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 TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHOMA ASSET MANAGEMENT LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

TALLAHASSEE FLORIDA

16 OCT -4 PM 2: 50



Authentication: 203054785

Date: 09-26-16

6161630 8300 SR# 20165932925