

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000034640

Entity Name: EU-US, LLC

FILED  
Oct 26, 2008  
Secretary of State

**Current Principal Place of Business:**

3451 BAYOU SOUND  
LONGBOAT KEY, FL 34228 US

**New Principal Place of Business:**

**Current Mailing Address:**

3451 BAYOU SOUND  
LONGBOAT KEY, FL 34228 US

**New Mailing Address:**

FEI Number: 76-0721654      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CASON, NANCY E ESQUIRE  
1900 RINGLING BLVD  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: NANCY E. CASON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DE WAAL, CHARLOTTE  
Address: 4915 1ST AVE EAST  
City-St-Zip: BRADENTON, FL 34208 US

Title: MGRM ( ) Delete  
Name: HAGMAN, HELMER  
Address: 3451 BAYOU SOUND  
City-St-Zip: LONGBOAT KEY, FL 34228 US

Title: MGRM ( ) Delete  
Name: HAGMAN, HANS CHRISTIAN  
Address: 3451 BAYOU SOUND  
City-St-Zip: LONGBOAT KEY, FL 34229

Title: MGRM ( ) Delete  
Name: HAGMAN, CARL  
Address: 3451 BAYOU SOUND  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGRM ( ) Delete  
Name: DE WAAL, MARIANNE  
Address: 4915-1ST AVENUE EAST  
City-St-Zip: BRADENTON, FL 34208

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHARLOTTE DE WAAL

MGRM

10/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date