## L08000033894

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
888 A VOU 1975	

Office Use Only



000122019680



PILED

08 APR -3 AM 9: 25

SECRETARY OF STATE
ALL AHASSEE EL STATE

B. KOHR
APR - 4 2008

**EXAMINER** 



ACCOUNT NO. : 072100000032 REFERENCE: 514263 4319460 AUTHORIZATION : C COST LIMIT : ORDER DATE: April 3, 2008 ORDER TIME : 1:55 PM ORDER NO. : 514263-005 CUSTOMER NO: 4319460 DOMESTIC FILING NAME: ENZO HOLDING COMPANY, LLC EFFECTIVE DATE: XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR I	FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is	is:
Enzo Holding Company, LLC	
. (Must end with the words "Limited Lis	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address;	Mailing Address:
Woodbourne Hall, Road Town	Park Place, Park Street
Tortola, British Virgin Islands	St Peter Port, Guernsey, Channel Islands, GY1 IEE
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Repusiness entity with an active Florida registration.)	
The name and the Florida street address of the	e registered agent are:
Corporation Service C	Company
Nan	<del></del>
1201 Hays Street	
	address (P.O. Box <u>NOT</u> acceptable)
Tallahassee	pr 32301

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 608, F.S..

City, State, and Zip

(CONTINUED) Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Eton Management Ltd., Manager, By: Park Place, Park Street, St Peter Port Guernsey, Channel Islands, GY1 1FE (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Pees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

ARTICLE IV- Manager(s) or Managing Member(s):

\$ 5.00 Certificate of Status (Optional)

Eton Management Ltd., Manager, By:

Typed or printed name of signee