# F/2000003075

(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:					

Office Use Only



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W12-38393



# FLORIDA DEPARTMENT OF STATE Division of Corporations

July 20, 2012

1

CAPITAL CONNECTION, INC. 417 E. VIRGINIA STREET SUITE 1 TALLAHASSEE, FL 32301

SUBJECT: EUROPA HEALTH PRODUCTS LIMITED

Ref. Number: W12000038393

We have received your document for EUROPA HEALTH PRODUCTS LIMITED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collects a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 112A00019233

District of Commentions D.O. DOV 0007 Melleleness Media 00014

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

174 Ponger's Printing - Thom stylle, GA 8/00

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Eurpoa Health Prod	ucts Limited		
Eurpoa Health Prod	ucts Limited In	ic	
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			✓ Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
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			Driving Record
Requested by: SETH	07/24/12		UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
Maitic	Date	Time	UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

# COVER LETTER

COVER LETTER					
TO: New Filing Section Division of Corporations					
SUBJECT: Europa Health Products Limited					
Name of corporation - must include suffix					
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation for Authorization to Transact "Certificate of Existence," or "Certificate of Good Standing" and check are submabove referenced foreign corporation to transact business in Florida.	t Business in Florida," nitted to register the				
Please return all correspondence concerning this matter to the following:					
Neil Bernard Crawford					
Name of Person					
Europa Health Products Limited					
Firm/Company					
Third Floor, Leisure Island Business Centre					
Address					
Ocean Village, Gibraitar					
City/State and Zip code					
neil@oceanvillage.gi					
E-mail address: (to be used for future annual report no	otification)				
For further information concerning this matter, please call:					
Jon Skelton, Esq. at (239 ) 334-2195					
Jon Skelton, Esq. at (239) 334-2195  Name of Person Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: MAILING AD New Filing Section New Filing Sec	tlon				
Division of Corporations Division of Cor Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, FL 32314					
Taliahassee, FL 32301					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy				

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Europa Heal	th Products Limited Inc			
"Inc.," "Co.," "C	corporation; must include "INCORPORATED," corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
770	414 22		<del>-</del> -	
•	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacting business in Florida	.)	
2. Gibraltar	under the law of which it is incorporated)	(PEI number, if applicable)	_	
	• •			
4. April 10, 20 (Date	01 5. F	Curation: Year copp. will cease to exist or "perpetual")	_	
6.	UDan	qualification		
V	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150)	Florida, if prior to registration)	_	
7. Third Floor	, Leisure Island Business Centro		_	
	(Principal office address	•		
Third Floo	r, Leisure Island Business Cer (Current mailing addre		_	
	(Carrent maning addres	53)		
8. Real Estat	e Investment			
(Purpose(	s) of corporation authorized in home state or cour	ntry to be carried out in state of Florida)	<b>-</b>	
9. Name and street	et address of Florida registered agent: (P.O. 1	Box NOT acceptable)	. 7	engh da
Name:	Jon P. Skelton	<u></u>	. 5	engh sti E enjemen
Office Address:	1833 Hendry St.		. <u>.</u>	ţoruecue "
	Fort Myers	, Florida 33901		بي. و ا
	(City)	(Zip code)	် ဣ	•; '92 • .
	gent's acceptance:	ू <b>का</b> - प्रकार प्रकार		
		of process for the above stated corporation at the nt as registered agent and agree to act in this cape		
further agree to c	omply with the provisions of all statutes rela	ative to the proper and complete performance of n		
una 1 am jamuai	with and accept the obligations of my posit	ion as registerea agent.		
	Im Shall	ű.		
_	Registered agent's signature)			

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_\_\_ Address: \_\_\_\_ Vice Chairman: \_\_\_\_ Director: Barbara Sellors Address: 12 Brittania House Marina Bay, Gibraltar Director: Neil Crawford Address: El Bosque 27, Avenida Las Golonrinas Guadacorte, Los Barrios, 11370, Spain **B. OFFICERS** President: \_\_ Address: \_ 0 6 Vice President: Address: \_\_\_ Secretary: \_\_ NOTE: If necessary, you may attach an addendum to ppe application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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. 14. \_\_\_\_ NEXL CRAWFORD DIRECTOR

(Typed or printed name and capacity of person signing application)





# The Companies Act Laws of Gibraltar

IT IS HEREBY CERTIFIED that EUROPA HEALTH PRODUCTS LIMITED was incorporated in Gibraltar under the Companies Act of the Laws of Gibraltar as a private company limited by shares on the 10th day of April Two Thousand and One with incorporation number 79935.

THE FOLLOWING INFORMATION IS CERTIFIED from the documents Registered with the Registrar and kept on the file of the company in the custody of the Registrar of Companies:-

## **DIRECTORS**:

Name

**BARBARA ANNE SELLORS** 

Address

12 BRITANNIA HOUSE, MARINA BAY, GIBRALTAR

Nationality

BRITISH

Occupation

**BUSINESSWOMAN** 

Appointed on

25/04/2001

Name

**NEIL BERNARD CRAWFORD** 

Address

EL BOSQUE 27 AVENIDA LAS GOLONRINAS, GUADACORTE, LOS BARRIOS

11370, SPAIN

Nationality

**BRITISH** 

Occupation

**BUSINESSMAN** 

Appointed on

21/07/2011

' Name

BARBARA ANNE SELLORS

· Address

12 BRITANNIA HOUSE, MARINA BAY, GIBRALTAR

Nationality

**BRITISH** 

Occupation

BUSINESSWOMAN

Appointed on

21/07/2011

### **REGISTERED OFFICE:**

The situation of the registered office is SUITE 3-3, LEISURE ISLAND BUSINESS CENTRE, LEISURE ISLAND, 23 OCEAN VILLAGE PROMENADE, OCEAN VILLAGE, GIBRALTAR.

## SHARE CAPITAL as at 11/07/2012:

The authorised nominal share capital of the company is:

GBP 2,000.00 divided into:

2000 ORDINARY shares of GBP 1 each

The total number of authorised shares is:

2,000.00

The issued nominal share capital of the company is:

GBP 2,000.00 divided into:

2000 ORDINARY shares of GBP 1 each

The total number of issued shares is:

2,000.00

If the company has issued any shares at a premium no such premium will appear on this certificate, such information must be obtained from the Return of Allotments and/or the published accounts filed by the company at the Registry.

According to the records of the Company held at the Registry of Companies, the Company has been in uninterrupted existence since the date of its incorporation.

There is no document Registered on the file of the said Company kept by the Registrar of Companies which shows that proceedings have been commenced by the Company or against the Company for winding, striking-off or liquidation.

Given at Gibraltar the 11th day of July 2012.



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