

L 000000004109

CARSTEN ALTING
(404) 817-6137
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LAW OFFICES
NELSON MULLINS FLEY & SCARBOROUGH, L.L.P.
A REGISTERED LIMITED LIABILITY PARTNERSHIP

999 PEACHTREE STREET, N.E.
FIRST UNION PLAZA
SUITE 1400
ATLANTA, GEORGIA 30309
TELEPHONE (404) 817-6000
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OTHER OFFICES:
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CHARLOTTE, NORTH CAROLINA
COLUMBIA, SOUTH CAROLINA
GREENVILLE, SOUTH CAROLINA
MYRTLE BEACH, SOUTH CAROLINA
MUNICH, GERMANY

31. March 2000

Via Mail
Florida Department of State
Registration Section
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

200003196852--D
-04/05/00--01059-012
****125.00 ****125.00

RE: Formation of Leonhardt Gruppe USA, LC

L-4109

Dear Madam/Sir:

Please, find enclosed the formation documents for the above entity, along with a check in the amount of \$ 125. Upon processing the formation, we kindly request getting your confirmation that the company has been formed.

Thank you very much for your attention and efforts. Should you have further questions, please contact us at your earliest convenience.

Sincerely yours,


Carsten Alting
Rechtsanwalt

Encl.

FILED
00 APR 5 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L-4109

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Leonhardt Gruppe USA, LC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

140 Atlantic Drive, Maitland, FL 32751

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

CT Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation FL 33324

City, State, and Zip

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..

Mary R. Adams

Registered Agent's Signature

MARY R. ADAMS

ASSISTANT SECRETARY

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Carsten Altting
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.)

Carsten Altting

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)

FILED
00 APR -5 AM 10:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA