

Division of Corporations

Page 1 of 1

L01000006874

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000062174 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

LIMITED LIABILITY COMPANY**EUROPEAN PERFECTION, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2001 MAY -2 PM 1:59 MAY -2 PM 12:23

FILED
RECEIVED

Electronic Filing Menu

Corporate Filing

Public Access Help

SL

H01000062174 7

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY****ARTICLE I – Name:** The name of the Limited Liability Company is:**EUROPEAN PERFECTION, LLC****ARTICLE II – Address:** The mailing address and street address of the principal office of the Limited Liability Company is:**15965 ARBOR View Blvd., Suite 723, Naples, Florida 34110****ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:** The name and the Florida street address of the registered agent are:**Christian B. Felden, Esquire, 3838 Tamiami Trail N., Suite 416, Naples, Florida 34103**

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.

Christian B. Felden
Registered Agent's Signature

ARTICLE IV – Management: The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The initial Manager and Member's name and address is:

Klaudia Dzmurova, 15965 Arbor View Blvd., No. 723, Naples, FL 34110

Klaudia Dzmurova
Signature of a member or 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.)

Klaudia Dzmurova
Typed or print name of signee

2001 MAY -2 PM 1:57
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

H01000062174 7