## 108000017836

Registration Section Division of Corporation

To whom it may concern:

7/15

CC4UUS

900006410939--1 -07/15/02--01078--006 \*\*\*\*\*160.00 \*\*\*\*160.00

I am requesting a registration of my limited liability company, Estat U International LLC. I have enclosed a check of 160\$, which should cover filling fee for article of organization, designation of registered agent, certified copy, and certificate of

status. Thank you very much.

Name: Kazuaki Uekawa

Address: 5050 S. Lake Shore Dr. #1715, Chicago IL 60615

Phone Number: 773-363-3909 (Cell Phone: 773-312-6921)

Email: kuekawa@estati.com

Thank you very much.

Kazuaki Uekawa

7/9/2002

02 JUL 15 AH II: 21
SEUMETAKY OF STATE

## ARTICLÈS OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is:   |
|---|
| Estat U. International LLC  |
| ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:  5050 S. Lake Shore Dr. #1715  Chicago, IL 60615  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:   |
| The name and the Florida street address of the registered agent are:  |
| CHARLES E. FEDAR. Name  |
| 17121 Morris Bridge Road  Florida street address (P.O. Box NOT acceptable)  |
| Thonotosassa FL 33592-2259 City, State, and Zip   |
| 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.  Registered Agent's Signature |
| 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.  |
| N. l. Nekawa  |
| Signature of a member or an authorized representative of a member.  |
| 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.)  |
| Kazuaki Uekawa  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)