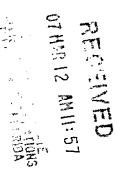
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-59	73
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CORPORATION NAME(S) & DOCUME	
1. EURO INTERNATIO	7
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3.	
(Corporation Name)	(Document #)
4.	
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: EURO INTERNATIONAL SERVICES., Le (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Náme

19430 N.W. 3rc/ COURT

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

Pembrowe Pines M. 33029

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. Registered Agent's Signature (REQURED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = M: "MGRM" = 1	anager Managing Membel	Name and Address:	
	ZM	OSCAR LOPEZ 19430 N. W. 3-0 COURT Pembrake Pres, Fl. 3302°	٠ أ
			-हार रहार -
			er v ale
(Use attachn	nent if necessary)		<u></u>
CLE V: Effec effective date 0 days after t	tive date, if other th	nan the date of filing:	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)