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DIVISION ASSESSED FLORIDA

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SECRETARY OF STATE

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CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET CECRETARY SEE ACCT. #FCA-14 **CONTACT: ASHLEY SMITH** DATE: 12-05-2007 **REF. #:** RA2188.78003 CORP. NAME: EURO SALES & MARKETING, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () TRADEMARK/SERVICE MARK () ANNUAL REPORT () FICTITIOUS NAME () FOREIGN QUALIFICATION (XX) LIMITED LIABILITY () LIMITED PARTNERSHIP () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 52384 FOR \$ 125.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$____ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY () CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION FOR PLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	My is	
Euro Sales & Marketing, LI	LC:	
	ed Liability Company, 41-11-01, or 2012 (1)	
ARTICLE II - Address: The mailing address and street address of	(the principal office of the Limited Liabilit	TOWN BY
Principal Office Address:	Malling Address:	75 3 S
973 Old Federal Highway	923 Old Federal Highway	10 3
Hallandele Beach, Ft. 33009	Hallandale Beach FL 33009	
The familial Labbility Company Carbon serve as it to buildings; entire with an example Florida registration. The name and the Florida street address:	on Registered Agent. You must designate an individual or of the registered agent are:	- exount
Andy Treusch	Esq.	
<u> Andy Treusch</u>	, Esq.	
<u>Andy Trausch</u> 1535 Ramblin	Name	
i.535_Ramblin	Name	
1535 Ramblin Plonda's Deland, Flor	Nume ig Oaks <u>Larre</u> treet address (P.O. Box. <u>NOT</u> acceptable)	

Himing been named as registered agent and to accept service of process for the above stated limited
thability company, at the place designated in this certificate. I hereby accept the appointment as
registered agent and agree to use in this capacity. I himber agree, by comply with the provisions of all
standes 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 Agod's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managen	Name and Address: Member	
MGR	Joseph Arango	-
	923 Old Federal Highway	<u></u>
,	Hallandele Beach, FL. 33009	
(Use attachment if nec	essary)	
ELE V: Effective date,	f other than the date of filing	(OPTIONA
ELE V: Effective date,	f other than the date of filing	(OPTIONA
ELE V: Effective date, ffective date is listed, t	f other than the date of filing be date must be specific and cannot be more than five hiling.)	(OPTIONA Pusiness day
ELE V: Effective date, ffective date, to days after the date of REQUIRED SIGNA	f other than the date of filing he date must be specific and cannot be more than five he filing.)	usiness day
ELE V: Effective date, iffective date is listed, to days after the date of REQUIRED SIGNATIONS.	f other than the date of filing he date must be specific and cannot be more than five he filing.) TURE: tarreof a mamber or an authorized representative of a member. Coppance with section 608 408(3). Florida Stanues, the execution	usiness day
ELE V: Effective date, iffective date is listed, to days after the date of REQUIRED SIGNATION Signature (In according to the content of the c	f other than the date of filing he date must be specific and cannot be more than five he filing.)	usiness day

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)