## L09000017501

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT . MAIL	•
	,
(Business Entity Name)	
(Document Number)	
ertified Copies Certificates of Status	
	1.

A. LUNT

SEP - 2 2009

**EXAMINER** 

Office Use Only



900159328759

08/28/09--01007--010 \*\*55.00

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ			NTERNATIONAL LLC Limited Liability Company			
	Nume o.	Limite	u Diaon	inty Con	ilpuity	
Dear S	Sir or Madam:					
The e	nclosed Registered Agent/Registered	Office (	Change	and fee	e(s) are submitted for filing.	
Please	e return all correspondence concernir	ng this m	atter to	the fol	lowing:	
	EKREM UZMAN					
	Name of Person		<del></del>	<del>-</del>		
	·					
		_				
	EU INTERNATIONAL LL	<u>.C</u>				
	Firm/Company					
	16900 N BAY RD #151	7				
	Address			<del></del>		
	CHANNICLES DEACH EL	22460				
SUNNY ISLES BEACH, FL 33160						
	City/State and Zip Code					
<del></del>	sales@e-anatolia.com -mail address: (to be used for future annual repo	rt notificati	ion)			
1.	-man address. (to be used for future aimum repo	it nomican	ion)			
For fu	irther information concerning this m	atter, ple	ease cal	1:		
	-					
	EKREM UZMAN		054	,	907-2082	
	Name of Person	at (_	954	)	de & Daytime Telephone Number	
	Name of Ferson			Aica Co	de de Daytime Telephone Number	
	STREET/COURIER ADDRESS:		M	AILING	GADDRESS:	
	Registration Section Registration Section					
	Division of Corporations Division of Corporations					
	Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32314					e, Fłorida 32314	
	Tallahassee, Florida 32301					
	Enclosed is a check for the follow	ving am	Ount.			
	Enclosed is a cheek for the follow	THE AIII	vuii.			
	\$25 Filing Fee		<b>7</b> \$	55 Filir	ng Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	EU INTERNATIONAL LLC
2. (a) Principal office address of limited liability c	company: 4174 INVERRARY DR #810
(Note: MUST BE STREET ADDRESS)	LAUDERHILL, FL 33319
(b) Mailing address of limited liability company	y: 4174 INVERRARY DR #810
_[✓](Note: MAY BE POST OFFICE BOX)	LAUDERHILL, FL 33319
8/25/2009	EIN 30-05354
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dein of State:
Registered Agent:	EKREM UZMAN
Registered Office Address:	16900 N BAY RD # 1512 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	SS) 3740 NW 78th STREET, BAY #2 MIAMI,FL33147
Signature of a Month of authorized representative of a member  EKREM UZMAN  Printed or typed name of signee	
	Rox 6327 Tallahassee FL 32314

**FILING FEE: \$25.00**