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EU 9. 15

June 1, 2009

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

D'Curve USA, LLC

Filing Evidence

- Plain/Confirmation Copy
- □ Certified Copy

Retrieval Request

- □ Photocopy
- \Box Certified Copy

Type of Document

- □ Certificate of Status
- □ Certificate of Good Standing
- \Box Articles Only
- □ All Charter Documents to Include Articles & Amendments
- □ Fictitious Name Certificate
- \Box Other

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x	Limited Liability	
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OTHER FILINGS	
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	Fictitious Name
	Name Reservation
	Reinstatement

AMENDMENTS
Amendment
 Resignation of RA Officer/Director
Change of Registered Agent
 Dissolution/Withdrawal
Merger

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

D'CURVE USA, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "ILC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is

Principal Office Address:

950 S. Pine Island Road		
Suite A-150		
Plantation, FL 33324	<u> </u>	

Mailing Address:

950 S. Pine Island Road Suite A-150 Plantation, FL 33324

FILED IN 9. 15

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:

	Name
950 S. Pine Isia	and Road, Suite A-150
F	lorida street address (P.O. Box NOT acceptable)

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited llability 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 (RBQUIRED) MICHAEL MARGULIES

> (CONTINUED) Page1of2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Michael Margulies
	950 S. Pine Island Rd, Ste A-150 Plantation, FL 33324
MGR	Tony H. Li 1F., No. 24 Lane 205, Chung Shan Rd Tainan City, 701, Taiwan

(Use attachment if necessary)

-

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

<u>REQUIRED</u> SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608,408(3), Florida Statutor, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated berein are true.)

Michael Marguiles, Authorized Representative of a Member Typed or printed name of algone

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)

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