

L09000093255

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000209099 3)))



H090002090993ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED
09 SEP 28 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

FILED
09 SEP 28 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

NATURINA USA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT # 409000209099 3

FILED

09 SEP 28 AM 8:18

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**ARTICLES OF ORGANIZATION
OF
NATURINA USA LLC**

ARTICLE I NAME

The name of the limited liability company shall be: NATURINA USA LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
1550 Madruga Avenue, Suite 330, Coral Gables, Florida 33146.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Emmanuel Morel, 1550 Madruga Avenue
Coral Gables, Florida 33146. Located in the County of Miami Dade.

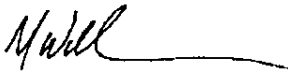
ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and
address of the member of the Limited Liability Company is:

Emmanuel Morel, 1550 Madruga Avenue, Suite 330, Coral Gables, Florida 33146



Date: September 17, 2009

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717

(608) 827-5300

FAX AUDIT # 409000209099 3

FAX AUDIT #

409000209099 3CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: NATURINA USA LLC

The name and address of the registered agent and office is Emmanuel Morel, 1550 Madruga Avenue, Coral Gables, Florida 33146. Located in the County of Miami Dade.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: _____


Emmanuel Morel

Date: _____

09/22/2009

FILED
09 SEP 28 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT #

409000209099 3