

# L09000111004

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : FLORIDA INCORPORATORS, INC.  
Account Number : 075350000473  
Phone : (813) 632-7882  
Fax Number : (305) 402-3141

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA/FOREIGN LIMITED LIABILITY CO.  
SLOVEAST LLC**

Certificate of Status	0
Certified Copy	1
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**S. HAWKES**

NOV 19 2009

**EXAMINER**

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ARTICLES OF ORGANIZATION FOR

SLOVEAST LLC

A FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

SLOVEAST LLC

ARTICLE II - Reg. Agent and Registered Office:

The initial registered agent and registered office of the limited liability company shall be Florida Incorporators, Inc., 8875 Hidden River Pkwy Ste. 300, Tampa, FL 33637, United States of America, United States of America.

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

50 years

FLORIDA INCORPORATORS, INC.  
8875 Hidden River Pkwy Ste 300 1  
Tampa, FL 33637  
(813) 632-7882

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ARTICLE IV - Management:

The Limited Liability Company is to be managed by a manager who is empowered to act solely on behalf of the Limited Liability Company, and the name, address, and date of birth of the manager is:

**Mr. Milton Philbert**

**Manager**

Date of birth: 20<sup>th</sup> July 1950

Address: 24 Murphy's Lane, Goodwill, Dominica

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

The remaining members may admit additional members upon the majority vote of the remaining members consenting to the admission of the additional member.

ARTICLE VI - Members Rights to Continue Business:

The right of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The remaining members have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited

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liability company upon the majority vote of the remaining members.

ARTICLE VII - Mailing Address:

The mailing address of the Limited Liability Company is:

SLOVEAST LLC  
7803 Blue Spring Drive  
Land O Lakes, FL 34639  
United States of America

ARTICLE VIII - Street Address:

The street address of the principal office of the Limited Liability Company is:

SLOVEAST LLC  
7803 Blue Spring Drive  
Land O Lakes, FL 34639  
United States of America

ARTICLE IX - Effective Date:

The effective filing date of the Limited Liability Company shall be November 12, 2009

ARTICLE X - Members and Contribution:

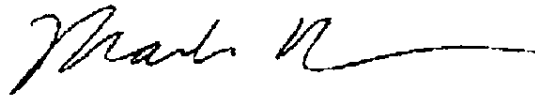
The total capital contribution shall be \$10,000 U.S. and the members and their ownership percentages in the Limited Liability Company shall be as follows:

SILESIA INVESTMENT LTD	100 %
Suite 13, First Floor,	
Oliaji Trade Centre, Francis Rachel Street,	
Victoria, Mahe,	
Seychelles	

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DATED: November 18, 2009

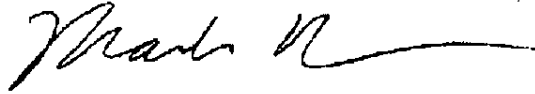


MARK HANKINS  
Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

I hereby declare I am familiar with and accept the duties and responsibilities as registered agent of the limited liability company.

FLORIDA INCORPORATORS, INC.



By: \_\_\_\_\_  
MARK HANKINS, President

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