Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : LAZARUS CORPORATE FILING SERVE

Account Number : 120000000019 Phone

: (305)552-5973

Fax Number

: (305)220-1440

the email address for this business entity to be used for future

Eaphual report mailings. Enter only one email address please.**

CEmmail Address:

FLORIDA LIMITED LIABILITY CO. EUROPA INVESTMENT LLC

Certificate of Status

Certified Copy

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Page Count

03

Estimated Charge

\$130.00

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OCT 28 2010

EXAMINER

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H10000232906

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
EUROPA INVE	STMENT LLC	2
ARTICLE II - Address:		
The mailing address and street address of the pri	ncipal office of the Limited Liability (Company is:
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Principal Office Address:	Mailing Address:	
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HIR 1901 F2 33012	X,50	
	No.	CT 2.7, AM
		3
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signat	uffe:
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re	<u> </u>	
MarioNU	Hes-Sontos	
Maille		

Having been named as registered agent and to accept service of process for the above stated limited liability 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 (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

3052201440

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Filing Foes:

\$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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