

06/25/2032 05:26
8/14/2014

0682 P.001/003

L14000128169

Florida Department of State
Division of Corporations
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.

(((H14000192090 3)))



H140001920903ABC

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

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I200000000019
Phone : (305) 552-5973
Fax Number : (305) 675-5944

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

Email Address: _____

RECEIVED

14 AUG 14 PM 4:45

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

**FLORIDA LIMITED LIABILITY CO.
E-SAVEUR USA LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

14 AUG 14 AM 9:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA

AUG 15 2014

T. HAMPTON

06/25/2032 05:27

05/12/2013 01:34

3050006306

ADEL GONZALEZ CPA PA

#0682 P.002/003

PAGE 02/03

H14000192090

ARTICLES OF ORGANIZATION
OF
E-SAVEUR USA LLC.

The undersigned, desiring to form a limited liability company (hereinafter the "Company") under and pursuant to Florida Statue 608 entitled the Florida Limited Liability Company Act (the "Act"), does hereby adopt the following Articles of Organization for the Company.

ARTICLE I : NAME

The name of the Company shall be: **E-SAVEUR USA LLC.**

ARTICLE II : DURATION

The Company shall commence existence on the date these Articles of Organization are filed with the Florida Department of State. The period of the Company's duration shall be perpetual, unless the Company is dissolved earlier pursuant to the provisions of the Regulations or the Act.

ARTICLE III: ADDRESS

The place of business and mailing address of the Company shall be :
3260 West Crown Pointe Blvd Apt. 102 Naples, FI 34112
and such other place or places as the members from time to time may determine.

ARTICLE IV: INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is :
3260 West Crown Pointe Blvd Apt. 102 Naples, FI 34112

The registered agent is : **Judith Meyniel**

and the principal business address of the Company shall be :
3260 West Crown Pointe Blvd Apt. 102 Naples, FI 34112

ARTICLE V : MANAGEMENT OF COMPANY

Management of the Company shall be vested in the Member and is, therefore, a Member-managed company.

The members of this Company, and their respective membership shares shall be:

Judith Meyniel

100%



14 AUG 14 AM 9:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA

H14000192090

06/25/2032 05:27

05/12/2013 01:34 3050886305

ADEL GONZALEZ CPA PA

#0682 P.003/003

PAGE 03/03

H14000192090

ARTICLE VI: INDEMNIFICATION


The Company does hereby indemnify its Manager for any of their conduct on behalf of, or related to their duties as Manager of the Company and holds harmless for any acts on behalf of or in connection with its services for the Company.

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in the Articles of Organization, I hereby accept this 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 this position as registered agent.

SIGNATURE

DATE


Judith Meynie
8/14/14

FILED
14 AUG 14 AM 9:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA

H14000192090