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Florida Department of State
Division of Corporations
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Attached is a completed Document Please provide filing date of June 16, 2015 Thankyou

From:
Account Name : AGENTS AND CORPORATIONS, INC
Account Number : T20010000112
Phone : (302)575-0875
Fax Number : (302)575-1642

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 LIMITED LIABILITY CO.
S&CB-Patrimoine LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$125.00

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June 17, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AGENTS AND CORPORATIONS, INC.

,

SUBJECT: S&CB-PATRIMOINE LLC
REF: W15000041920

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H15000147064
Letter Number: 315A00012707

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

S&CB-Patrimoine LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
14 CHEMIN MONLONG	14 CHEMIN MONLONG
31100 TOULOUSE	31100 TOULOUSE
FRANCE	FRANCE

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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:

AGENTS AND CORPORATIONS, INC.
Name

300 FIFTH AVENUE SOUTH SUITE 101-330
Florida street address (P.O. Box NOT acceptable)

NAPLES FL 34012
City Zip

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 statues 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 605, F.S..

Agents and Corporations, Inc.

By: [signature]
Registered Agent's Signature (Required)
John L. Williams, President

(CONTINUED)

ARTICLE IV-
The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
~~"AMBR" = Authorized Member~~ "MGR" = Manager	SEBASTIEN BUKACZEWSKI 14 CHEMIN MOLONG 31100 TOULOUSE FRANCE

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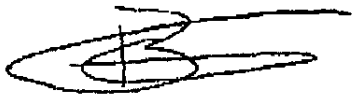
(Use attachment if necessary)

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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), 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.)

SEABSTIEN BUKACZEWSKI
Typed or printed name of signee

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)