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From: David Thomas

Division of Corporations Electronic Filing Cover Sheet 9

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To: Division of Corporations Fax Number : (850)617-6381

from:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

). ,

Phone Fax Number

: (614)280-3338 : (614)573-3996

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

Email Address:\_

af@db-group.fr

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## FLORIDA LIMITED LIABILITY CO.

## **DBFI** Management LLC

| Certificate of Status | 0        |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIÁBÏLITY ČÓMPANY

ARTICLE I - Name:

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The name of the Limited Liability Company is:

DBFI Management LLC

(Must contain 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:

75 rue de Richelieu Paris, 75002, France 75 ruc de Richolica

Paris, 75002.

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,

C T Corporation System

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Florida City Zip State

Having been named as registered agent and to accept service of process for the above statelyhmited liability company at the place designated in this certificate. Thereby 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 605, F.S.,

C T Corporation System

By: Feth\_ A. U.L. Kathryn A. Widdoes - Assistant Secretary
Registered Agent's Signature (REQUIRED)

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