(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: HDB FOR LC
·



000051084280

W.H

04/25/05--01029--011 **125.00

TRANSMITTAL LETTER

SUBJECT:	Division of Corporations
Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida Please return all correspondence concerning this matter to the following: HELENE GRACHON (Name of Person) LINE THOUGH (Firm/Company) Company	
HELENE GRACION (Name of Person) (Name of Person) EURO INTOUTES CO ERA EURORE (Firm/Company) 120 University Pack De Suite 210 (Address) Winter Rank, Fl. 3272. (City/State and Zip Code) For further information concerning this matter, please call: HELENE Gracion at Got Street Registration Section Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314	Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited
FORD INTOURS (Firm/Company) DO UNIVERSITY PORCE DE SUITE 210 (Address) Winter Roll De Suite 210 (Address) City/State and Zip Code) For further information concerning this matter, please call: Helene Gra Groon at Got, 657-7992 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32314	Please return all correspondence concerning this matter to the following:
(Address) Winter Pour De Suite 210 (Address) Winter Row, F. 31771. (City/State and Zip Code) For further information concerning this matter, please call: Hele Cra Crool at Act 657-7991 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Tallahassee, Florida 32314	(Name of Person)
(City/State and Zip Code) For further information concerning this matter, please call: HELENE Gra Groon at Got b St - 7992 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Registration Section Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314	EURO I FORONZO CO ERA EURORE (Firm/Company)
For further information concerning this matter, please call: Hele Ga Galo at A OF 657-792 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314	120 University Par De, SUITE 210 (Address)
For further information concerning this matter, please call: HELENE Gra Gonon at 407 657-7921 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Winter Barr, F. 327921. (City/State and Zip Code)
HELENE Gracemon at (A07) 657-7992 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314	
Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

S125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: EURO IHMOWER LIMITED
(Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: WEBSITE DEDIGN Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

WO HENENER

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:
	EURO IMMONSES LIMIT
2.	The name and the Florida street address of the registered agent and office are:
	JAMES WI HEAVER
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Winter Palk FL 32792.

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

(DOT OF STATE)

Companies Registration Office Library

Short Certificate of Incorporation of a

Company

I hereby certify,

that company number

EURO IMMOWEB LIMITED

was Incorporated under the Companies Acts, 1963 to 2001,

as a Limited Company

Thursday, the 21st day of August, 2003.

Given under my hand at Dublin, this

Thursday, the 14th day of April, 2005.

for Registrar of Companies