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J. SAULSBERRY EXAMINER

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA SIXIUIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

i. ¹	HUNIC Design LLC	
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
cons	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil mpany," "L.L.C.," "LLC.")	written ity
	4554 UR	
(J	Wisconsin Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	•
4. 3	2/9/2005 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	upon filing	
,	Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	2011 A
7	3619 NE 270th Street #2301, Aventura, Florida 33180	R
	SSR SSR	٩
-		
8 .]	If limited liability company is a manager-managed company, check here	AK In
9. '	The name and usual business addresses of the managing members or managers are as follows:	. 7
	Erika Lopez Karpati, 3619 NE 270th Street #2301, Aventura, Florida 33180	
	Dezso Lopez Karpati, 3619 NE 270th Street #2301, Aventura, Florida 33180	
thej	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recipits of the certificate of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a station of the certificate under onth of the translator must be submitted.)	ords in
11.	Nature of business or purposes to be conducted or promoted in Florida:	
<u> </u>	All lawful business	
	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.)	
	Erika Lopez Karpati	

Typed or printed name of signee

14110000901533

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 I	Liability Company is:		
HUNIC Design LLC			
If name unavailable, the alter	mate name to be used in the state of Florida is:		
•	street address of the registered agent and office are:	SECRETA TALLAHA	2011 APR - K
Business Filin	ngs Incorporated (Name)	SSE	ا ک
1203 Governo F	ors Square Blvd, Suite 101, Florida Street Address (P.O. Box NOT ACCEPTABLE)	m	AM 10: 47
Tailahassee	FL 32301-2960 City/State/Zip		
liability company at the place of agent and agree to act in this control relating to the proper and compobligations of my position as references.	ered agent and to accept service of process for the above state designated in this certificate, I hereby accept the appointment capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 608, Florida Stati	nt as register statutes accept the	ed:
Null			
(Signatum	c)		
Mark Williams, A.V.P., Business	s Filings Incorporated		
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)		

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Secretary, Department of Financial Institutions, do hereby certify that

HUNIC DESIGN LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is February 9, 2005.

I further certify that said corporation or limited liability company has, within its most recently completed reyear, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official scal of the Department on March 30, 2011.



RAY ALLEN, Deputy Secretary Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

90006-DE28E0FF