

Office Use Only
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EXAMINER



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#### **COVER LETTER**

SUBJECT: Eden Health and	Name of Limited Liability Company
	ited Liability Company for Authorization to Transact Business in Florida," Certificate of ter the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning	g this matter to the following:
Gary Murphree	
	Name of Person
Murphree Law LLC	
	Firm/Company
7385 SW 87th Ave	e., Ste. 100
	Address
Miami, FL 33173	•
	City/State and Zip Code
gmurphree@abr	eulaw.org
E-mail ac	dress: (to be used for future annual report notification)
For further information concerning this mat	ter, please call:
Gary Murphree	at (305 ) 441-9530
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
Registration Section P.O. Box 6327	Registration Section Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

### 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. Eden Health and Beauty LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")	
		<u></u>
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and atta consent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C," "LLC.")	en a copy o the "Limited I	t the written Liability
2. Delaware 3. 45-2460556		
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable	)	
4. 06/06/2011 5. Perpetual		
(Date of Organization) (Duration: Year limited liability compare exist or "perpetual")	ny will ceas	e to
6. not yet transacting business		<del></del>
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
<sub>7.</sub> 159 Bal Bay Drive		
Bal Harbour, FL 33154		** ( <u>**</u>
(Street Address of Principal Office)	28 35 55	7
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 fo	Hows: ~	
Mordechai Gelbhauer		
159 Bal Bay Drive		
Bal Harbor, FL 33154		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fore 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: All lawful bu	ısiness	
KIM		<del></del>
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	

Mordechai Gelbhauer

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.)

## ' 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.

. The name of the Limited Liability Company is:	
Eden Health and Beauty LLC	
f unavailable, the alternate to be used in the state of Florida is:  —	
2. The name and the Florida street address of the registered agent and office are:	
Northwest Registered Agent, LLC	
(Name)	
3111 W. Dr. MLK Blvd., Ste. 100-B180  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tampa <sub>FL</sub> 33607	
City/State/Zip	
daving been named as registered agent and to accept service of process for the above stated limited iability company at the place designated in this certificate, I hereby accept the appointment as registent and agree to act in this capacity. I further agree to comply with the provisions of all statutes elating to the proper and complete performance of my duties, and I am familiar with and accept the bligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  (Signature)	stered
\$ 100.00 Filing Fee for Application	

**Designation of Registered Agent** 

**Certificate of Status (optional)** 

**Certified Copy (optional)** 

\$ 25.00

\$ 30.00 \$ 5.00

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EDEN HEALTH AND BEAUTY LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SIXTH DAY OF JUNE, A.D. 2011.

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AUTHENTY CATION: 8813140

DATE: 06-06-11