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EXAMINER



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08/23/11--01001--012 \*\*155.00





CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE <sup>1</sup> TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT: Kim Weidenbach

**DATE:** 08/22/11

Examiner's Initials

REF. #: 002083.153145

CORP. NAME: FIORI DIAMONDS, LLC

( ) ARTICLES OF INCORPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION
( ) ANNUAL REPORT	( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME
(XX) FOREIGN QUALIFICATION	( ) LIMITED PARTNERSHIP	( ) LIMITED LIABILITY
( ) REINSTATEMENT	( ) MERGER	( ) WITHDRAWAL
( ) CERTIFICATE OF CANCELLATION	ī	
( ) OTHER:		
STATE FEES PREPAID W	ITH CHECK# 571160	FOR \$ <u>155.00</u>
AUTHORIZATION FOR A	CCOUNT IF TO BE DEBITE	D:
	COST LI	MIT: \$
	COST BI	<u> </u>
PLEASE RETURN:		
( XX) CERTIFIED COPY	( ) CERTIFICATE OF GOOD STAN	DING ( ) PLAIN STAMPED COPY
( ) CERTIFICATE OF STATUS		
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### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 20 TRANSACT BUSINESS IN FLORIDA

TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. FIORI DIAMONDS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 2. DELAWARE (FE) number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 5. PERPETUAL (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. N/A (Date first transacted business in Florida, if prior to registration, (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 5391 SW 32ND WAY, FT. LAUDERDALE, FLORIDA 33312 (Street Address of Principal Office) 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: Bernard Bachoura, Manager 5391 SW 32nd Way, Ft. Lauderdale, Florida 33312 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: Jewelry Retail Stores

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. 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.)

BERNARD BACHOURA, Manager

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:
FIORI DIAMONDS, LLC
If 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:
Paracorp Incorporated
. (Name)
236 East 6th Avenue  Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee FL 32303
City/State/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 registere 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.
see attached
(Signature)
\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00

\$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

**DATE:** 08/22/2011

ENTITY NAME: FIORI DIAMONDS, LLC

#### **REGISTERED AGENT NAME AND ADDRESS:**

Paracorp Incorporated 236 East 6<sup>th</sup> Avenue Tallahassee, FL 32303

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Ninh Ho, Assistant Secretary Paracorp Incorporated

# Delaware

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#### The First State

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

DELAWARE, DO HEREBY CERTIFY "FIORI DIAMONDS, 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 SEVENTEENTH DAY OF AUGUST, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIORI DIAMONDS, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5009886 8300

110930231

AUTHENTY CATION: 8976468

DATE: 08-17-11

Jeffrey W. Bullock, Secretary of State

You may verify this certificate onling at corp. delaware.gov/authver.shtml