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NAME: PALOMA EVENING LLC

TYPE OF FILING: APPLICATION

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**AUTHORIZATION:** 

ABBIE/PÂUŁ

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

1 1

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LARBERT PORTAGE TRANSACT RESINESS IN THE STATE OF FLORIDA-

PALOMA EVENING LLC  (Name of Foreign Limited Liability Company; mass included to the company)  (Name of Foreign Limited Liability Company)  (Name of Foreign Limited Liability Company)		)		
(If name unavailable, enter afternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")				
DELAWARE     (Jurisdiction under the law of which foreign limited liability company is organized)     3.	APPLIED FOR (FEI number, if applicable)			
4. APRIL 15, 2013 5. (Date of Organization)	PERPETUAL  (Duration: Year limited liability company will ceal exist or "perpetual")	se to		
6. UPON QUALIFICATION (Date first transacted business in Flor (See sections 608,501 & 608,502 F.S.)	nds, if prior to registration.) to determine penalty liability)	DIVISIO 13 AI		
7. 6365 COLLINS AVENUE #1711  MIAMI BEACH, FLORIDA 33141		SECRETARY SECRETARY OF CHAPTE		
(Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here				
<ol> <li>The name and usual business addresses of the mana MGRM: PABLO MAYAUD-MAISONNEUVE, 6365</li> </ol>	-	3141		
MGRM: CECILIA ZSILAVI, 6365 COLLIN	S AVE #1711, MIAMI BEACH, FL 33	141		
10. Attached is an original certificate of existence, no more than 90 date jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under outh of the translation mass be subm	is not acceptable. If the certificate is in a foreign language			
11. Nature of business or purposes to be conducted or ANY LAWFUL PURPOSE	promoted in Florida:			
Signature of a member or an aut.  (In accordance with section 608,408(3), F.S., the execupenalities of perjury that the facts stated herein are true	horized representative of a member, tion of this document constitutes an affirmation under the a lam aware that any false information submitted in a a third degree felony as provided for in s.817.155. F.S.			
PABLO MAYAUD-I				

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 Limite	d Liability Compa	ny is:			
PALOMA EVE	NING LLC	Michigan de Maria de La Companya de			
If unavailable, the alternate	to be used in the	state of Florid	da is:		
2. The name and the Flori	da street address o	f the registere	d agent and office	ce are:	**************************************
PABLO N	AYAUD-MAIS	ONNEUVE			
-		(Name)			
6365 CC	LLINS AVEN				
	Florida Street Addr	ess (P.O. Box 🛕	OT ACCEPTABLE)		
MIAMI	3EACH	FL	33141		
		City/State/Zi	ין		
Having been named as regi liability company at the pla agent and agree to act in th relating to the proper and c obligations of my position of	ce designated in th is capacity. I furth omplete performat	is certificate, li er agree to co ace of my dutie as provided fo	hereby accept the help with the pross, and Lam famili	ie appointment as wisions of all stati liar with and accep	registered ites of the

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PALOMA EVENING 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 TWENTY-THIRD DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PALOMA EVENING LLC" WAS FORMED ON THE FIFTEENTH DAY OF APRIL, A.D. 2013.

5319353 8300

130909468

AUTHENTY CATION: 0608979

DATE: 07-23-13

You may vorify this certificate online at corp.delaware.gov/authver.shtml