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(((H150000664193)))



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Division of Corporations

Fax Number : (850)617-6383

RE-SUBMIT

From:

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Phone : (850) 205~8842 : (850)878-5368 Fax Number

date of submission 3/16

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company E'Cucina Home Appliances, LLC

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COVER LETTER

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March 17, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

*DE-SIBMIT

SUBJECT: E'CUCINA HOME APPLIANCES, LLC

REF: W15000018842

Please reiain and militing date of submission slip

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Earris Regulatory Specialist II FAX Aud. #: H15000066419 Letter Number: B15A00005343

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

IN COMPLIANCE WITH SECTION 6050002, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ECucina Home Apphances, LLC (Name of Foreign Limited Lighth)	y Company: must include "hunted I tability Company." "LL.C	." or "LLC.")
(If name unavailable, enter alternate name adopt Liability Company," "LLC," or "LLC,")	ed to the purpose of translating basiness in Florida. The alterna	ite name must include "Limited
2 Delaware	3 47-2712402	
(Jurisdiction under the law of which foreign is company is organized)	mated trabatiny (FEI notable), if ap	plicable)
4. N/A		
(Date first (See sections	transacted husiness in Florida, it prior to registration) 605 0904 & 605 5905, F.S. to determine penalty liability)	
5. ECucina Home Appliances, LLC		20 7.5
2577 NW 59th Street, Hoca Raton,	PL 33496	LCR HA
	(Sirest Address of Principal Office)	> ₹ 20
6. E'Cucina Home Appliances, LLC		T6
	22.00	<u> </u>
2577 NW E9th Street, Homa Raton,	(Slading Address)	<u> </u>
7. The name, title or capacity and a	ddress of the person(s) who has/have authority to	o manage is/are:
Daniel Verner, Managing Member 2577 NW 59th Street	· · · · · · · · · · · · · · · · · · ·	
Bora Raton, FL 33496		
having custody of records in the juri-	of existence, no more than 90 days old, duly aud sdiction under the law of which it is organized. (oreign language, a translation of the certificate ur	A photocopy is not
	Signature of an authorized person	
(In accordance with section 605 (203-178), the miseru	Signature of an authorized person inner the peratties of person that the peratties of person that the Department of State continues a trial degree felony as pr	
Daniel Verner		
**************************************	Exped or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

lf unavaila	ble, the alternate to be used in the	he state of Florida is:	
2. The na	ne and the Florida street addres	s of the registered agent and office are:	2015 MAR 16 SECRETAR TALLAHASS
	CT Corporation System		MAR 16 : RETARY (AHASSEF
(Name)		16 ARY	
	1200 South Pine Island Road		OF SEE. FI
	Florida Sucet A	address (P.O. Box NOT ACCEPSABLE)	AM IO: 07 OF STATE EE.FLORID
	Plantation	FL 33324	
	**************************************	City/State/Zip	
ability co egistered tatutes rei ccept the	mpany at the place designated a agent and agree to act in this ca lating to the proper and complete	d to accept service of process for the above in this certificate. I hereby accept the appoin pacity. I further agree to comply with the p e performance of my duties, and I am famil gistered agent as provided for in Chapter 6	ntment as provisions of all liar with and
latules.		Control (156)	Santa Danas

Designation of Registered Agent

Certified Copy (optional)
Certificate of Status (optional)

\$ 25.00

\$ 30.00

5.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "E'CUCINA HOME APPLIANCES, 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 SIXTEENTH DAY OF MARCH, A.D. 2015.

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

5668817

150362830

Jelliey W. Bullock, Secretary of State
ATION: 2202534

DATE: 03-16-15