(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
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# **COVER LETTER**

Registration Section

TO:

Div	ision of Corporation	S							
SUBJECT:	EUROTRANS LLC								
		Name of Limited Liability Company							
The enclosed Existence, ar	I "Application by Fore and check are submitted	eign Limited Liability Comp d to register the above refere	any for Authoriza nced foreign limit	tion to Tra ed liability	nsact Business in Florida, company to transact busi	" Certificate of ness in Florida			
Please return	all correspondence c	oncerning this matter to the	following:						
	STUART HOW	/ITT							
		Na	me of Person			~			
	HOWITT & AS	HOWITT & ASSOCIATES INC							
	Firm/Company								
	3333 W COMM	3333 W COMMERCIAL BLVD, STE 110  Address							
	Address								
	FT LAUDERDALE FL 33309								
		City/State and Zip Code							
	stu@btbline.com								
		E-mail address: (to be used	for future annual	report not	fication)	-			
For further in	nformation concerning	g this matter, please call:							
Stu	art Howitt		954 at (	735-717	78	_			
	Name o	f Contact Person	Area Code	Day	time Telephone Number	_			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301							
Enclosed is a check for the following amount:  ■ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status				□ \$160.00 Filing Fee, Cof Status & Certified Co					

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

<b>EUROTRANS OF PORT</b>	ign Limited Liability Company; must ST LUCIE LLC	include "Limited Liah	oility Company," "L.L.C.," or "l	LLC.")	
	ternate name adopted for the purpose of	of transacting busines	s in Florida. The alternate name	must include "Lim	ited
2. Connecticut	of LLC. )	2 01-0829967			
(Jurisdiction under the law company is organized)	of which foreign limited liability	3	(FEI number, if applicable)	·	
4.					
	(Date first transacted business (See sections 605.0904 & 605.09	in Florida, if prior to	registration.)		
5. 11380 SW Reston Ct	(500 500 500 500 500 500 500 500 500 500				
Port St Lucie FL 34987	,				
	(Street Address of Pri	incipal Office)			
6. 11380 SW Reston Ct			····		
Port St Lucie FL 34987	,				
	(Mailing Ac	idress)			
7. Name and street addres	s of Florida registered agent: (P.O	). Box <u>NOT</u> accept	able)	इ	
Name:	Zlatan Hukic		_	55 <b>25 25 25 25 25 25 25 2</b>	e
Office Address:	11380 SW Reston Ct		_		Postanie .
	Port St Lucie		, Florida 34987	28.E	-
Registered agent's accept	(City)		(Zip code)	무무 교	1.7
designated in this applicate to complywith the provision to the complywith the provision to the complywith the provision to the comply with the complete	gistered agent and to accept service tion, I hereby accept the appointm ons of all statutes relative to the point my position as registered agent.  (Register	nent as registered a	gent and agree to act in this	capacity; I full	er agree
	city and address of the person(s) v	vho has/have author	ity to manage is/are:		
8. The name, title or capa	ien, and address of the person(s)				
8. The name, title or capa Zlatan Hukic (MBR) 1138	30 SW Reston Ct, Port St Lucie FL	_ 34987			
Zlatan Hukic (MBR) 1138		··· ·-· ·-			
Zlatan Hukic (MBR) 1138 Mirza Bucuk (MBR) 1138 9. Attached is a certificate	30 SW Reston Ct, Port St Lucie FL 30 SW Reston Ct, Port St Lucie FL of existence, no more than 90 days of which it is organized. (If the cer	_ 34987 s old, duly authentic rtificate is in a foreig	gn language, a translation of t		
Zlatan Hukic (MBR) 1138  Mirza Bucuk (MBR) 1138  9. Attached is a certificate jurisdiction under the law	30 SW Reston Ct, Port St Lucie FL 30 SW Reston Ct, Port St Lucie FL of existence, no more than 90 days of which it is organized. (If the cer	_ 34987 s old, duly authentic rtificate is in a foreig			

Typed or printed name of signee

Zlatan Hukic

## Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

### **EUROTRANS LLC**

a domestic limited liability company, were filed in this office on March 15, 2005.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: October 28, 2015

Business ID: 0814762 Express Certificate Number: 2015322326001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov