

M99000001536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

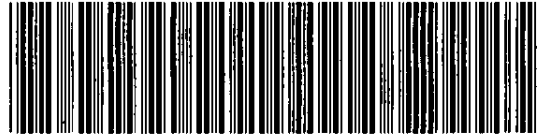
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300150261953

04/16/09--01025--001 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 APR 16 PM 12:18

T. HAMPTON

APR 17 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** COSTA CRUISE LINES N.V. L.L.C.  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Calarco  
(Name of Person)

COSTA CRUISE LINES  
(Firm/Company)

200 S. PARK ROAD ST#200  
(Address)

HOLLYWOOD FL. 33021-8541  
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES CALARCO at (954) 571-9909  
(Name of Person) (Area Code and Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: COSTA CRUISE LINES N.V. L.L.C.
2. This entity was formed under the laws of: Antilles, NETHERLANDS
3. This entity was authorized to transact business in Florida on 9/29/1999  
and its Florida document/registration number is M99000001536
4. The name and address of each manager or managing member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address:

MGR

FOSCHI, PIER LUIGI  
VIA XII OTTOBRE, 2  
16121 GENOA, ITALY IT IT

MGR

ONORATO, GIOVANNI  
VIA XII OTTOBRE, 2  
16121 GENOA, ITALY IT IT

MGR

ZARMATI, MAURICE  
200 S. PARK ROAD, STE. 200  
HOLLYWOOD, FL 33021-3541 US

MGR

CURACAO CORPORATION Company N.V.  
DE RUITERKADE 62, P.O. Box 812  
CURACAO NETHERLANDS ANTILLES

MGR

MALTESE, BENIAMINO  
VIA XII OTTOBRE, 2  
16121 GENOA, ITALY IT IT

Required Signature: \_\_\_\_\_

(Signature of Manager, Managing Member or Member)

Filing Fee: \$25

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 APR 16 PM 12:18