

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000004225

**Entity Name:** DBM LUXEMBOURG FINANCE S.A.R.L., LLC

**Current Principal Place of Business:**

560-A, RUE DE NEUDORF  
L-2220 LUXEMBOURG, XX L-222

**Current Mailing Address:**

258 SOUTHHALL LANE  
SUITE 450  
MAITLAND, FL 32804

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name FENDER, CHRISTOPHE  
Address 23 RUE DE BRUYERES  
City-State-Zip: 1274-HOWARLD XX L-222

Title MGR  
Name SUNNEN, LUC  
Address 23 RUE DE BRUYERES  
City-State-Zip: 1274-HOWARLD XX L-222

Title MGR  
Name JONES, PAMELA M  
Address 258 SOUTHHALL LANE, #450  
City-State-Zip: MAITLAND FL 32751

Title MGR  
Name STORM-DEVOLZ, KARINE  
Address 258 SOUTHHALL LANE, #450  
City-State-Zip: MAITLAND FL 32751

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAMELA M. JONES

**MANAGER**

**02/13/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date