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FLORIDA DEPARTMENT OF STATE
Division of Corporations
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Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
OCALA OIL SERVICES LLC.**

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Certificate of Status	1
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Page Count	03
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K. SALY
EXAMINER
JUL 9 2003

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ocala Oil Services LLC.

(Must end with the words "Limited Liability Company: "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1395 BRUCKER AV.
Suite 3303 - CONRAD
MIAMI - FL. 33131

SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GABRIELE SPILMBERGO

Name

1395 BRUCKER AV. Suite 3303

Florida street address (P.O. Box NOT acceptable)

MIAMI FL. FL 33131

City, State, and Zip

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

GABRIELE SPILIMBERGO
1395 BRUNNEN AV. Suite 3303
MIAMI FL 33131

MGRM

LUIS ENRIQUE RAMIREZ ZAMORA
1395

MGRM

LUIS ENRIQUE RAMIREZ GONZALEZ

MGRM

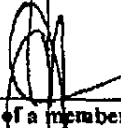
JULIO CESAR RAMIREZ

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Gabriele Spilimbergo
Typed or printed name of signee

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