

Division of Corporations

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Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : DAVID FONG
Account Number : I20020000037
Phone : (407) 894-1557
Fax Number : (407) 895-1357

LIMITED LIABILITY COMPANY

Good Gloves Trading, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name of Limited Liability Company:

Good Gloves Trading, LLC

ARTICLE II - Address:

1221 E. Robinson St.
Orlando, Florida 32801

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

David Fong
Name

1221 E. Robinson Street
Florida Street Address

Orlando, Florida 32801
City, State, Zip

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.

[Signature]
Registered Agent's Signature

3/21/02
Date

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

Apiwadee Satchakul

1920 East 2nd St., #4116, Edmond, OK 73034

[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.)

Apiwadee Satchakul

Typed or Printed Name of Signee

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