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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: LUBRI AMERICA, LLC (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing.			
ASDRUBAL RIVER((Name of Person)	<u> </u>		
SUPRA OIL & GAS (Firm/Company)			
11980 GLENMORE Dr. (Address)			
CORAL SPRING, FL 33071 (City/State and Zip Code)			
For further information concerning this matter, please call:			
ASDRUBAL RIVERO (Name of Person)	at (561) 305.72.90 (Area Code & Daytime Telephone Number)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
LUBRI AMERICA, 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:
200 S. BISCAYNE BLVD.	11980 GLENMORE Dr.
SUIT 4815	CORAL SPRING FL 33071
MIAMI FL 33131	

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

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

ASDRUBAL RIVERO		
Name		
11980 GLENMORE Dr.		
Florida street address (P.O. Box NOT acceptable)		
CORAL SPRING FL 33071		
City, State, and Zip		

Having been named as registered agent and to accept service of process for the above stated finited 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..

Andrubel Nivero
Registered Agent's Signature

(CONTINUED)

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:
MGRM	ASDRUBAL RIVERO 11920 GLENMORE DY. CORAL SPRING FL 33071
MGRM	GUILLERMO GIANNOTTI 200 S. BISCAYNE BLUD. SUIT 4815. MIANI FL 33)31
(Use attachment if necessary) NOTE: An additional article must be a	ndded if an effective date is requested.
REQUIRED SIGNATURE:	

Andrubal Linero
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.)

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)