

Electronic Filing Cover Sheet

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To:

Division of Corporations : (850)205-0383

Fax Number

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 : (305)716-0346 Fax Number

LIMITED LIABILITY COMPANY

LMOILINT'L L.

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LM OILINT'L LLC

ARTICLE II - Address:

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

6355 N.W. 36 ST. SUITE 507 MIAMI, FL. 33166

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

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

| LU. | IS E. VA | RGAS | |
|-------------------|-------------|-----------|---------|
| | Nam | ic | |
| 6355 N.W. 36 | STREET | SUITE | No. 507 |
| Florida street ac | | | |
| | | | |
|] | MIAMI | FL | 33166 |
| | City, State | , and 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.

Registered Agent's Signature

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| Article IV – Management (Check box if applicable.) |
|--|
| The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company. |
| (An additional article must be added if an effective date is requested) |
| 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.) |
| ANA I VARGAS |
| Typed or printed name of signee |