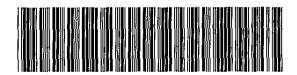
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101 Address

CORAL GABLES, FL 33134 City/State/Zip

(305) 444-4994

Phone #



Examiner's Initials

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):					
1. Global Trust Realty, LLC					
(Corporation Name)	(Document #)				
(Corporation Name)	(Document #)				
3 .					
(Corporation Name)	(Document ∦)				
4. (Corporation Name)	(Document #)				
Walk in Pick up	time Certified Copy				
Mail out Will wait	Photocopy Certificate of Status				
NEW FILINGS	AMENDMENTS				
Profit	Amendment				
NonProfit	Resignation of R.A., Officer/ Director				
Limited Liability	Change of Registered Agent				
Domestication	Dissolution/Withdrawal				
Other	Merger				
OTHER FILNGS	REGISTRATION/				
Annual Report	QUALIFICATION				
Fictitious Name	Foreign				
Name Reservation	Limited Partnership				

Trademark

Other

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name: The name of the Limited Liability Company is:	FLORIDA		
GLOBAL TRUST REALTY	', 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:		
4921 SW 186 AVE	444 BRICKELL AVE		
Southwest fanches, Fl 33332	#51-443		
, , , , , , , , , , , , , , , , , , ,	MIAMI FL 33131		
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register	• • •		

LAWFENC	C Soto		
	Name		
444 B	ficher i	AVE 3	#51-443
Florida street a	address (P.O. B	ox <u>NOT</u> ac	ceptable)
MIAM	1 FL	FLORID	33131
(ity, 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (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	Name and Address:
"MGRM" = Managing Member MGR	LAWRENCE SOTO 444 BRICKELL AVE #51-443
MGRM	LUIS ALEMAN
MGRM	Southwest function FL 33332 KAFL THOMPSON
. 10	19380 COLUNS AVE #31018 SHUNTSIES, FL 33166
(Use attachment if necessary)	

NOTE: An additional article must be added if an effective date is requested.

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.)

LAWRENCE SOTO

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)