L04000089681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)
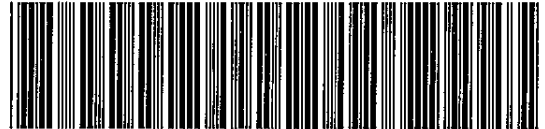
☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

300043200393

FILED
04 DEC 10 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 DEC 10 PM 4:17

ACCOUNT NO. : 072100000032

REFERENCE : 074521 121767A

AUTHORIZATION : *Patricia Piguit*

COST LIMIT : $ 125.00

ORDER DATE : December 9, 2004

ORDER TIME : 2:42 PM

ORDER NO. : 074521-005

CUSTOMER NO: 121767A

CUSTOMER: Ms. Melonnie J. Jordan
Karp & Genauer, P.a.

Suite 1202
2 Alhambra Plaza
Coral Gables, FL 33134

DOMESTIC FILING

NAME: GLOBAL SOLUTIONS NETWORK LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: _____

FILED
04 DEC 10 AM 10: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
04 DEC 10 AM 10: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

GLOBAL SOLUTIONS NETWORK LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1172 S. Dixie Highway

#532

Coral Gables FL 33146-2918

Mailing Address:

1172 S. Dixie Highway

#532

Coral Gables FL 33146-2918

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

Alhambra Registered Agents, Inc.
<p style="text-align:center">Name</p>

2 Alhambra Plaza, Suite 1202
<p style="text-align:center">Florida street address (P.O. Box NOT acceptable)</p>

Coral Gables   FLORIDA 33134
<p style="text-align:center">City, State, and Zip</p>

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..

Alhambra Registered Agents, Inc.

By: _____
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:

<u>Title:</u>
"MGR" = Manager
"MGRM" = Managing Member
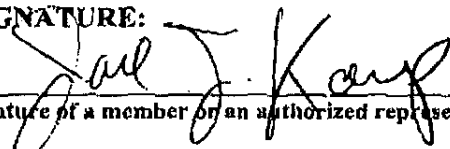
<u>Name and Address:</u>

MGRM   Carlos Musibay

1172 S. Dixie Highway #532

Coral Gables FL 33146-2918

(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.)

By: Joel J. Karp, Esq.
Typed or printed name of signee

<u>Filing Fees:</u>
$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)