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FLORIDA/FOREIGN LIMITED LIABILITY CO.

MAXIM WELL SERVICES LLC

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June 22, 2007

FLORIDA DEPARTMENT OF STATE Division of Corporations

FASTKIT CORPORATE OUTFITS

SUBJECT: MAXIM WELL SERVICES LLC

REF: W07000029580

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ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MAXIM WELL SERVICES LLC		
(Must end with the words "Limited Liability Com	vany, "Limited Company" or their abbreviation "LLC," or "L.C.,")	•
ARTICLE II - Address:		
	s of the principal office of the Limited Liability Co	mpany is:
_		
Principal Office Address:	Mailing Address:	
11914 GREEN OAK DRIVE	11914 GREEN OAK DRIVE	
DAVIE, FL 33390		-
NUAICH 1 F 49/490	DAVIE, FL 33330	_
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signatur	
ARTICLE III - Registered Agent, R The Limited Limbility Company cannot serve as it business onlity with an active Florida registration	egistered Office, & Registered Agent's Signatur s own Registered Agent. You must designant an individual of snot)	her 07
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ARTICLE III - Registered Agent, R The Limited Limitity Company cannot serve as it business county with an active Florida registration	egistered Office, & Registered Agent's Signature own Registered Agent. You must designant an Individual designant an Individual designant and Indi	NUL 70
ARTICLE III - Registered Agent, R The Limited Limitity Company cannot serve as it business county with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's Signatures own Registered Agent. You must designant an individual designant an individual designant and ind	07 JUN 2
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ARTICLE III - Registered Agent, R The Limited Limitity Company connect serve as it business county with an active Florida registration The name and the Florida street address CATHERINE GIUR 11914 GREEN O	egistered Office, & Registered Agent's Signature own Registered Agent. You must designant an Individual designant an Individual designant an Individual designant and Indiv	07 JUN 25 AH S
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liaving 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 (REQUIRED)

EFFECTIVE DATE 6-20 07

(CONTINUED)
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The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR **CATHERINE GIURATO** 11914 GREEN OAK DRIVE **DAVIE, FL 33330** MOR ALEXANDER ARELLANO **CARRERA 18 #8570 APT 202** BOGOTA, COLOMBIA MGRM MARIA CONSTANZA PULIDO CARRETERA 51#123A53 APT 601 BOGOTA, COLOMBIA MGRM MARLON ANDRES RIVERA CARRERA 10# 5418 APT 603 BOGOTA, COLOMBIA (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 06-20-2007 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE** an authorized representative of a member. (In accordance with secrebs 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the populates of perjury that the facts stated herein are true.) # # Typed or printed name of signes

ARTICLE IV- Manager(s) or Managing Member(s):

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