

## Florida Department of State

Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : FASTKIT CORPORATE OUTFITS  
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Phone : (305) 599-0839  
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.****GLOBAL INTEL INVESTMENTS LLC.**

Certificate of Status	0
Certified Copy	1
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**11-13-07**

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Global Intel Investments LLC.

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**

3600 Mystic Pointe Dr #309  
Aventura Fl, 33180

**Mailing Address:**

3600 Mystic Pointe Dr #309  
Aventura Fl, 33180

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Giancarlo Butron

Name

3600 Mystic Pointe Dr #309

Florida street address (P.O. Box **NOT** acceptable)

Aventura Fl, 33180<sub>FL</sub>

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 (REQUIRED)

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**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

Francisco J. Baraza  
20533 Biscayne Blvd #158  
Aventura Fl, 33180

MGRM

Gustavo Looz  
18000 North Bay Rd #203  
Sunny Isles Fl, 33160

MGRM

Glancarlo Butron  
3600 Mystic Pointe Dr #309  
Aventura Fl, 33180

MGRM

Dino Gravini  
3600 Mystic Pointe Dr #309  
Aventura Fl, 33180

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 11/13/2007 (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:**

  
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.)

Francisco J. Baraza  
Typed or printed name of signer

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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