

L080000031742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

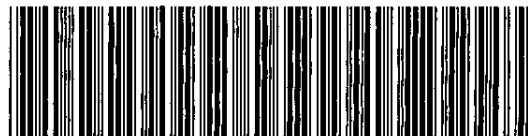
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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03/27/08--01030--004 \*\*160.00

**EFFECTIVE DATE**  
4/1/08

**FILED**  
08 MAR 27 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Collins MAR 28 2008

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: OM Trading Services LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Enrique Gardano  
(Name of Person)

Wachovia  
(Firm/Company)

1395 Brickell Ave., 1<sup>st</sup> Floor  
(Address)

Miami FL 33131  
(City/State and Zip Code)

For further information concerning this matter, please call:

Enrique Gardano at ( 305 ) 349-4055  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

OM Trading Services 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:

6769 B Montego Bay Blvd  
Boca Raton  
FL 33433

#### Mailing Address:

Enrique Gardano  
Wachovia, 1395 Brickell Ave 1st Floor  
Miami, FL 33131

### 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:

Carlos Mijares

Name

6769 B Montego Bay Blvd

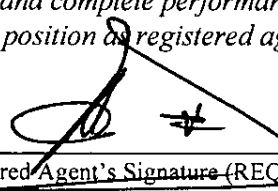
Florida street address (P.O. Box NOT acceptable)

Boca Raton FL 33433

City, State, and Zip

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TALLAHASSEE FLORIDA

*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)

(CONTINUED)

Page 1 of 2

**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:**

MGR

Carlos Mijares  
6769 B Montego Bay Blvd  
Boca Raton, FL 33433

MGRM

Carolina Gonzalez  
21205 NE 37th Ave Apt. 2203  
Aventura, FL 33180

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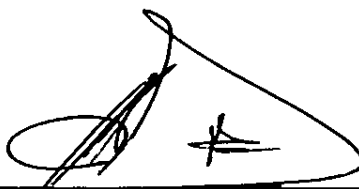
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 4/1/08 (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.)

Carlos Mijares  
\_\_\_\_\_  
Typed or printed name of signee

**FILED**  
**08 MAR 27 PM 2:02**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

**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)**