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	(Address)
	(Address)
	(City/State/Zip/Phone #)
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	(Business Entity Name)
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SECRETARY OF STATIONS
SIVISION OF CORPORATIONS
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J. BRYAN

JUL 2 4 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Global Loan Solutions, 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:	
Julius A. Kinkle Jr. (Name of Person)	
Global Loan Salutions, LLC	
8507 Colony Trace Dr	5
Ft. Myers, FL 33908 (City/State and Zip Code)	THE CARE TARY OF STATION SECRETARY OF CORPORATION O
	23 83
For further information concerning this matter, please call:	平彩彩
Julius A. Vinkle at (239) 822 - 2845 (Name of Person) (Area Code & Daytime Telephone Number)	11: 29
Enclosed is a cheek for the following amount:	
\$125.00 Filing Fee Status Stat	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

e	:
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The name of the Limited Liability Company is:

Global Loan Solutions, 2LC

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:		
8507 Colony Trace Dr.	8507 Colony Trace Or		
Ft. Myers, FL 33908	Ft. Myers, FL 33908		
APTICLE III - Registered Agent Pegistere	d Office & Degistered Agent's Signatures		

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:

Julius A. Kinkle, Jr.

Name

8507 Colony Trace Dr.

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

FJ. Myers FL 33908

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)

<u>Title:</u>		Name and Address.	
"MGR" = Mana	nger maging Member	Name and Address:	
MGR		Julius A. Winkle, . 8507 Colony Trace Dr. Ft. Myers, FL 33908	<u>Jr</u> .
MGRM		Dallacnis Fuentes 4080 33rd Arenue Naples, FL 34120	
			
	_		
(Use attachment	Lif necessary)		_
	• /	e date of filing: (OP)	TIONAL)
effective date is li O days after the d	sted, the date must b	e specific and cannot be more than five busine	ess days pri
BEOLUBED C			
<u>REQUIRED</u> SI	IGNATURE:		1-
	Sulin A	Kille La	08 JUL
	Signature of a member	er or an authorized representative of a member.	
	of this document const that the facts stated h	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury nerein are true.)	23 AHII: 29
	Julia	es A. Kinkle, Jr.	
	Ту	ped or printed name of signee	29

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

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)