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Office Use Only



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S. HAWKES

MAY 2 7 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Clobal Capital Conding Group Name of Limited Liability Company
The encl	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
_	Jose E Cardova Name of Person
	Global Capital Londing Group
-4	13538 Village Park Dr. Suite 260
40° _	Orlando FL. 3283-7 City/State and Zip Code
	Processing Daca Net E-mail address: (to be used for further annual report notification)
For furth	ner information concerning this matter, please call:
Jose	e F Cardona at (407) 288-5376 Name of Person Area Code & Daytime Telephone Number
Enclose	d is a check for the following amount:
₹ \$125.0	0 Filing Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$155.00 Filing Fee & \$\int_\$\$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

Clobal Capital Condine (Must end with the words "Limited Liability	y Company," "L.E.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13538 Village Dr Svite 260 Orlando FL 32837	12328 Abberton CT Orlando FL. 32837
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the results and the Florida street address of the Florida street address and the Florida street address a	gistered agent are:
10378 Abberto Florida street address (P.O.) Orlando	A C + Sign Sign Sign Sign Sign Sign Sign Sign

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)

City, State, and Zip

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Tose E. Cardona 12328 Abberton Ct Orlando Fl. 32837 30 30 77
	7 26 PH 3: 2
	<u> </u>
(Use attachment if necessary)	
If an effective date is listed, the date must be o or 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a member	or an authorized representative of a member.
of this document constitute that the facts stated here	E Cardona
Filing Fees:	ped or printed name of signee
\$125.00 Filing Fee for Articles of Organ	nization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)