L0400011407

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer: L. SELLERS			
NOV 1 9 2009			
EXAMINER			





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11/12/09--01044--020 **130.00

SECRUTARY OF STATE TALLAHASSEF FLORINA

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	Name of Limited Liability	EUM, LLC. y Company			
The en	The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please	Please return all correspondence concerning this matter to the following:				
	HENRI HAGE Name of I	Person			
	STRUL-TECH CON	JSTAU LTON, CO.			
	801 W. McNa	BRD.			
	POMPANO BEACH City/State and	I, FLORIDA 33060 Zip Code			
	E-mail address: (to be used for future as	CAST. NET			
For further information concerning this matter, please call:					
	HENRI HAGE at 9	54 <u>783 - 4-600</u> Area Code & Daytime Telephone Number			
Enclos	losed is a check for the following amount:				
\$125 .	25.00 Filing Fee \$\frac{1}{2}\$130.00 Filing Fee & Certificate of Status Certificate of Status	00 Filing Fee & S160.00 Filing Fee, fied Copy conal copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Registration Section II Division of Corporations II P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 1661 Executive Center Circle Callahassee, FL 32301			



November 13, 2009

HENRI HAGE 801 W. MCNAB ROAD POMPANO BEACH, FL 33060

SUBJECT: OGS PETROLEUM, LLC

Ref. Number: W09000050287

We have received your document for OGS PETROLEUM, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on November 12, 2009. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 709A00035554

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
OGS PETROLEUM, 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	y Comp	any is:
Principal Office Address: Mailing Address:		
BOIW. MCNAB RD BOIW. MCNAP POMPANO BEACH. POMPANO BEA FLORIDA 33060 FLORIDA 3	3 P	10.
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sign (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are: HENRI HAGE Name		
BOI W. MCNAB R Florida street address (P.O. Box NOT acceptable)		
POMPANO FL 33060 BEXCH City, State, and Zip		
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appregistered agent and agree to act in this capacity. I further agree to comply with the p statutes relating to the proper and complete performance of my duties, and I am fam accept the obligations of my position as registered agent as provided for in Chapte	oointmer provision iliar wit	nt as ns of all th and
Registered Agent's Signature (REQUIRED)		09 NOV 12
(CONTINUED)	يجد لشا	₽ 17

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:			
MGRM	HENRI HAGE BOI W. MCNAB RD POMPANO BEACH, FL 33060			
(Use attachment if necessary) ARTICLE V: Effective date, if other than the lift an effective date is listed, the date must be a second of the control of the lift.	date of filing: 11 05 09 (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.				
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the benalties of perjury that the facts stated herein are true.) Typed or printed name of signee				
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)

O9 NOV 12 AM 8: 36