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(Requestor's Name)									
,									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
<u> </u>									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									
Special instructions to 1 ming difficult.									

Office Use Only



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FILEU 2010 FEB -4 MII: 25 SECRETARY OF STATE

C. LEWIS
FEB 5 2010
EXAMINER

COVER LETTER

TO:	Registration S Division of Co								
SUBJE	GLOMATEK LLC								
		Name of Limit	ed Liab	ility Con	npany				
The en	closed Articles of	Organization and fee(s) are	submit	ed for fil	ing.				
Please	return all correspo	ondence concerning this mat	ter to th	e follow	ing:				
	***	ENR		F. GAI	RCIA				
			Name	of Person					
	Firm/Company								
	3700 NW 124TH AVE, SUITE 139								
			Ad	dress					
				NGS, F	L 33065				
•		egaro	cia@g	lomate	k.com				
-		E-mail address: (to be used	for futur	e annual r	eport notification	on)			
For fur	ther information of	concerning this matter, pleas	e call:						
		E F. GARCIA	_ at (954)		07-9338		
	Name o	f Person		Area Co	ode & Daytime	reter	phone Number		
Enclos	sed is a check fo	r the following amount:							
[]\$ 125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ Ce	rtified (ling Fee & Copy opy 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		Registr Division Clifton 2661 E	Courier Addration Section on of Corpora Building Executive Cenassee, FL 323	tions ter C			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company	· is:							
GLOMAT (Must end with the words "Limited Lie	TEK LLC iability Company," "L.L.C.," or "LLC.")							
ARTICLE II - Address:	e principal office of the Limited Liability Company is:							
Principal Office Address:	Mailing Address:							
3700 NW 124TH AVE SUITE 139 CORAL SPRINGS, FL 33065	3700 NW 124TH AVE SUITE 139 CORAL SPRINGS, FL 33065							
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Resources business entity with an active Florida registration.) The name and the Florida street address of the	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another per registered agent are:							
	F CARCIA							
Nan	me English							
	W 96TH DR							
·	TO. Dox HOT acceptable)							
CORAL SPRINGS City, State	TE COCIO							
Having been named as registered agent and t liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S							

(CONTINUED)

Page 1 of 2

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

FILED

The name and addr		er or Managing Member is as follows:	2010 FEB -4	AM 11: 2
Title: "MGR" = Manager "MGRM" = Manager		Name and Address:	SECRETARY TALLAHASSE	OF STATI E. FLORII
MGRM	_	ENRIQUE F. GARCIA 4911 NW 96TH DRIVE CORAL SPRINGS, FL 33076		
MGRM	-	EDWIN A. PEREZ 7887 SIENNA SPRINGS DRIV LAKE WORTH, FL 33463	<u> </u>	
MGRM	_	CAECILIA HUIGEN-GARCIA 4911 NW 96TH DRIVE CORAL SPRINGS, FL 33076		
(Use attachment if CLE V: Effective date is listed days after the date	te, if other than the d	date of filing:	(OPTIONAI e business days	L) s prior
REQUIRED SIGN	NATURE:			
	_	or an authorized representative of a memb		
ì		tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjein are true.)		
		NRIQUE F. GARCIA		
Filing Fees:	Туг	ed or printed name of signee		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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