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Special Instructions to F	iling Officer:	
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04/07/10--01024--004 **125.00

Effective Date 04/05/10

T. HAMPTON APR - 8 2010 EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
		_		
SUBJE	ECT: ES&P G		ed Liability Company	
			· · · · · · · · · · · · · · · · · · ·	
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	pondence concerning this mat	ter to the following:	
	R. Scott Beau	umont		
			Name of Person	_
	ES&P Global	, LLC		
			Firm/Company	
	1100 NW 159	th Drive		
,			Address	_
	Miami, Florida	a 33169		
,	Timaring Fronta		y/State and Zip Code	_
	rsb@groutarn	nor.com		
-		E-mail address: (to be used to	or future annual report notification)	
For fur	ther information	concerning this matter, please	e call:	
R Sco	tt Beaumont		at (954) 815-6139	
	Name	of Person	Area Code & Daytime Telephone Number	
Enclos	ed is a check fo	or the following amount:		
☑\$125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status of 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	

Effective Date 64/05/10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
ES&P Global, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	·
	ncipal office of the Limited Liability Company is:
	25.11.
Principal Office Address:	Mailing Address:
1100 NW 159th Drive	90 Kerry Place Suite 2
Miami, Florida 33169	Norwood, MA 02062
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
R Scott Beaumont	
Name	
1421 South Ocean Blvd. a	#511
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
Pompano Beach	FL 33062
City, Stat	e, and Zip
Having been named as registered agent and to a	ccept service of process for the above stated limited

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

The name and address of each Manager or Managing Member is as follows:

MGR	R. Scott Beaumont
	1100 NW 159th Drive
	Miami, FL 33169
MGRM	Steve Perry
	90 Kerry Place Suite 2
	Norwood, MA 02062
MGRM	Donna Rossetti Gilmore
	90 Kerry Place Suite 2
	Norwood, MA 02062
(Use attachment if necessary)	
	an the date of filing: April 5, 2010 . (OPTIO
fective date is listed, the date m	ust be specific and cannot be more than five business of

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.)

R Scott Beaumont

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)