Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE

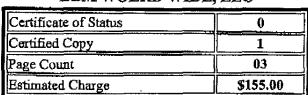
Account Number : I2000000146 Phone : (305)444-4994

Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. GBM WOLRD WIDE, LLC



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EXAMINE

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ARTICLES OF ORGANIZATION FOR FLORIDAL IMITED LIABILITY COMPANY

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

The name and the Florida street address of the registered agent are:

George Masslalas

Name

6463 La Costa Drive, Suite 606

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

Boca Raton

FL 33433

City, Stata, and Zip

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

-2013 WED 09:56 PM

ARTICLE I - Name:

The name of the Limited Liability Company is:

GBM World Wide, LLC

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..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	George Massialas	
	6463 La Costa Drive, Suite 606	
	Boca Raton, Florida 33433	
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CLE V: Effective date, if other than	the date of filing:	
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(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. I am aware that any false information submitted in a document to the Department of State constitutes a shird degree follows as provided for in s.817.155, R.S..)

Signature of a menther or an authorized representative of a member.

George Massialas

Typed or printed name of signee

Filing Freez

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 5 30.00 Cartified Copy (Optional)

5.05 Certificate of Status (Optional)