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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Fax Number : (305)633-9696

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

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FLORIDA LIMITED LIABILITY CO. TRANSGLOCAL, LLC



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ARTICLES OF ORGANIZATION FOR #1100012551 FLORIDA LIMITED LIABILITY COMPANY OF

TRANSGLOCAL, LLC

ARTICLE I

The name of the Limited Liability Company shall be: TRANSGLOCAL, LLC

7-5 盘 7:5

INISION OF CORPORALIUND

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company:

1918 BRICKELL AVE #503 MIAMI, FL 33129

ARTICLE IV

The name and the Florida street address of the registered agent:
PATRICIA GOMEZ

1918 BRICKELL AVE #503
MIAMI, FL 33129

ARTICLE V

The name of the Managing Member(s) and Member(s) shall be:

MANAGING MEMBER\MEMBER
PAUL CURLEE

MEMBER ANGELA GOMEZ

MEMBER
PATRICIA GOMEZ

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

TRANSGLOCAL, 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 the articles of organization, 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.

Patricia Gones Registered Agent

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.)

PATRICIA GOMEZ

Typed or printed name of signee

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