## 20138888 Division of Corporations

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : CORP USA

Account Number : 072450003255

: (305)634-3694

Fax Number

: (786)409-5946

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## FLORIDA LIMITED LIABILITY CO. GLOBAL BCO LLC

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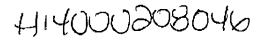
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PAGE 01/04

CORPUSA

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## COVER LETTER

TO: Registratio Division of	n Section Corporations					
SUBJECT: GLOB		mited Liability Company	<u> </u>			
The enclosed Articles	s of Organization and fee(s) a	re submitted for filing.				
Please return all corre	espondence concerning this n	natter to the following:				
JANET '	VASALLO	Name of Person		<b>X</b> .,	2614	
		Manue of Leadon		F · ·	SEP SEP	***
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MIAMI, F	Fl 33144	v	•	er.	വ	
Burning		City/State and Zip Code				
JVASALLO@A	OL.COM E-mail address: (to be use	d for future annual report notifica	cion)			
For further informatio	n concerning this matter, ple	·	,			
	,					
JANET VASALLO Na	at (	305 <u>261-5141</u> Area Code Daytime Tel	ephone Number			
Enclosed is a check for	or the following amount:					
☑ \$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	Certified Copy (additional cupy is enclosed)	Ostional Copy  (additional copy is enclose	:d)		
<u>М2</u>	iling Address	Street/Courier Addr	<u>-953</u>			

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallabassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clitton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
GLOBAL BCO LLC. (Must end with the words 'Limited	Liability Company, "L.L.C.," or "LLC.")	2014 SEP
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:	SEP -4
Principal Office Address:	Mailing Address:	المارية
ANDRES O. MARULANDA	1141 SW 10 STREET # REAR MIAMI, FL 33130	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration.)  The name and the Florida street address of the registered.	Registered Agent. You must designate an individ	lual or
ANDRES MARULANDA		
Name	•	
1141 SW 10 STREET REAR Florida street address (P.O. Box	NOT acceptable)	
MIAMI	FI. 33130	
City	Zip	
Having been named as registered agent and to accept ser the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obti Chapte Registered Agent's Signat	the appointment as registered agent and agree to of all statutes relating to the proper and complete igations of my position as registered agent as pro- cr 605, F.S	act in this performance
(CONTINUE	ED)	

Page 1 of 2

<u>Title:</u>		Name and Address:	
"AMBR" = Authorized N "MGR" = Manager	4cmber	Andres O. Marulanda	
MOR - Miniger			
		1141 SW 10 Street Rear Miami, FL 33130	
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