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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CLARA GIRALDO, P.A.
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Fax Number : (305)485-1098

****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.
GLOBAL PACIFIC ENERGY, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

15 JUL 23 PM 4:41

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF**

GLOBAL PACIFIC ENERGY, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

GLOBAL PACIFIC ENERGY, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**15481 SW 21 TERRACE
MIAMI, FL. 33185**

The mailing address shall be:

**15481 SW 21 TERRACE
MIAMI, FL. 33185**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

SAMIR A. KAFRUNI

15481 SW 21 TERRACE

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

MIAMI, FL. 33185

City, State, and Zip

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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 605, F.S..


REGISTERED AGENT'S SIGNATURE**ARTICLE IV- MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

JORGE I. HENAO
15481 SW 21 TERRACE
MIAMI, FL. 33185

MANAGER

SAMIR A. KAFRUNI
15481 SW 21 TERRACE
MIAMI, FL. 33185

MANAGER

(An additional article must be added if an effective date is requested)


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

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SAMIR A. KAFRUNI
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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