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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Office Use Only

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## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE	Name of Limited Liability Company	
The en	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Rosaño Del Carmen Tones Name of Person	
	Global Marketing Media, LLC Firm/Company	
	P.O. Box 340494  Address	
	Tampa FL 33694  City/State and Zip Code  VOSanotowes 07 @ amail-com  E-mail address: (to be used for future annual report notification)	
For furth	ner information concerning this matter, please call:	
	Rosaño tones at (813) 476-0762  Name of Person Area Code Daytime Telephone Number	
Enclose	ed is a check for the following amount:	
]\$125.0	\$130.00 Filing Fee & Sectificate of Status  Certified Copy (additional copy is enclosed)  S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	d)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2015

ROSARIO DEL CARMEN TORRES P.O. BOX 340494 TAMPA, FL 33694

SUBJECT: GLOBAL MARKETING MEDIA, LLC

Ref. Number: W15000067242

We have received your document for GLOBAL MARKETING MEDIA, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

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Letter Number: 315A00021454

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Contrany, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liability Country, "L.L.C.," or "LLC.")
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
12611 Touchon Drive, Apt. 201 P.O. Box 340494 Tampa, PC 33617 Tampa, PC 33694
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 business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Rosaño Del Carmen Touch Name 19611 Touchon Drive, Apt. 201
19611 Touchon Drive, Apt. 201 Florida street address (P.O. Box NOT acceptable)
Tampa PC 33617 City State Zip
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 (REQUIRED)
(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:  Rosano Del Camen Towes  3845 Trotan Loop:  Land O'Caller, PL 3463.P.
. (Use attachment if necessary)	
RTICLE V: Effective date, if other than the date of	filing: January 1, 2016 (OPTIONAL)
an effective date is listed, the date must be specified ate of filing.)  ote: If the date inserted in this block does not mee	fic and cannot be more to an five business days prior to or 90 days at et the applicable statutory filing requirements, this date will not be liste
an effective date is listed, the date must be specified date of filing.)  ote: If the date inserted in this block does not mee e document's effective date on the Department of the date on the Department of the date.	fic and cannot be more to an five business days prior to or 90 days at et the applicable statutory filing requirements, this date will not be liste
an effective date is listed, the date must be specified date of filing.)  ote: If the date inserted in this block does not mee e document's effective date on the Department of the date.	fic and cannot be more to an five business days prior to or 90 days at et the applicable statutory filing requirements, this date will not be liste
REQUIRED SIGNATURE:  Signature of a memily This document is executed I am aware that any false in constitutes a third degree fee.	the applicable statutory filing requirements, this date will not be listed State's records.  ber or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State belong as provided for in s.817.155, F.S.

ARTICLE IV-