## 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.

(((H17000237020 3)))



H170002370203ABOW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120800008019 Phone : (305)552-5973

Fax Number : (305)675-5944

\*\*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. GLOBAL ASSISTANCE LLC

Certificate of Status	1
Certified Copy	0
Page Count	93
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

與17000237020

## ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Mastend with the words "United Liability Company, "LLC," or "LLC.")

Global Assistance LLC

ARTICLE II - Address:

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

1615 South Congress Avenue Sorte 103 Delvay Beach, 71, 33445

ARTICLE III - Registered Agent, Registered Office:

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

Neisy Nieto 1615 South Congress Avenue Suite 103 Delray Beach, 71, 33445

The name and title of each person authorized to manage and control the Limited Liability Company:

Newy Nieto Monager Jorge Guedez Manager

Page 1 of 2

H 1700 0 23

H17000237020

## Required Signatures:

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

In accordance with section 605.0203 (i) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am sware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

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 appointment as registered agent and agree to act in this capacity. I further agree to comply with appointment as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with and accept the obligations of my position as registered agent as provided for 1 am familiar with a provided for 1 am familiar with a provided for 1 am familiar with a provided familiar with a provide

Registered Agent's Signature (REQUIRED)

TALLAHASSEE FIRMS