Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 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	;					
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FLORIDA LIMITED LIABILITY CO. GLOBAL PLUS EXPRESS, LLC

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

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:

The name of the Limited Liability Company is:
Clobal Plus Express LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
10881 SUS 6th ST APT#4 Miami, Pl, 33174
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limite. Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) JOSE Antonio Rivero Gonzalez 10881 Sw Gth St Agt#4 Hiami Pf 33174
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) 105e Avronio Trivevo Coonzalez (AMBR)

Required Signatures:

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. I am aware that any false information submitted in a document to the Depa tment 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 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)

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