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FILED 09 OCT -9 PM 4: 12 SECRETARY OF STATE

#### **COVER LETTER**

TO:

Registration Section

Division of Corporations
SURJECT: GLOTRADECO LLC
SUBJECT: 6LOTRADECO LLC  Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
ALEJANDRO JARAMILLO
Name of Person
6LOTRADECO LLC. Firm/Company
Firm/Company
26846 BELLA VISTA DR Address
Address
Itowey IN THE HILLS FL 34737.  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BUEJANDRO JARAMILLO at 777 7488583
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Copy} \\ \text{Certificate of Status} \\ \text{Certified Copy} \\ \text{Ortified Copy} \\



October 8, 2009

ALEJANDRO JARAMILLO 26846 BELLA VISTA DRIVE HOWEY IN THE HILLS, FL 34777

SUBJECT: GLOTRADECO LLC Ref. Number: W09000044958

We have received your document for GLOTRADECO LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return 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) 245-6067.

Letter Number: 809A00032501

Neysa Culligan Regulatory Specialist II

Division of Corporations - P.O. BOY 6327 - Tallahassee Florida 32314

Glotradeco LLC
26846 Bella Vista Drive
Howey in the Hills, FL 34737
To whom it may concern:
Enclosed please find an application and an original "Certificate of Good Standing" from Delaware, for
the processing of a "Certificate of Authorization" for Glotradeco LLC to be able to transact in Florida.
If you have any questions please do not hesitate to contact Alejandro Jaramillo @ 727-748 8583.
Thank you for your assistance in this matter.
Sincerely,
Alejandro Jaramillo
<b>→</b>

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### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 6	LOTRADE	SO LLC		e "Limited Liability Company," "L.L.C.,"	-		
	(Name of Foreign Lin	ited Liability Company; must	include	e "Limited Liability Company," "L.L.C.,"	or "LLC.")		
consen	e unavailable, enter al t of the managers or m ny," "L.L.C," "LLC."	anaging members adopting the	urpose altern	of transacting business in Plorida and atta ate name. The alternate name must include	ch a copy of e "Limited i	of the w Liabilit	ritten Y
			2	98-0506942			
2. (Juri com	sdiction under the law pany is organized)	of which foreign limited liabil	lity	98-0506942. (FEI number, if applicable	<del>)</del>	<del>.</del>	
			5	PERPETUAL.		٠	
T	(Date of Or	ganization)	<b>J.</b>	PELLETURT (Duration: Year limited liability comparexist or "perpetual")	ny valikçeas	130 <b>68</b>	-11
6		Date first transacted business i	n Plori	da, if prior to registration.)	<u> </u>	ف	
	(S	Date first transacted business to sections 608.501 & 608.502	F.S. to	determine penalty liability)	E ~	3	
7	26846	BELLA VISTA	DR	· · · · · · · · · · · · · · · · · · ·	S.3.	<u> </u>	
	Howey 11	1 THE Hills, A	ع ر	SY 737 Principal Office)	TATE ORID	22	
	·	(Street Add	iress of	Principal Office)	<del>-</del>		
		npany is a manager-mana		L.,_J			
9. The	e name and usual t	usiness addresses of the r	nanag	ing members or managers are as fo	llows:		
	ALGOMOPO JA	ramillo					
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	·						
				s old, duly authenticated by the official havi s not acceptable. If the certificate is in a fore			dsin
		ler oath of the translator must be			REVI BOTE CRAS	u, a	
	. 01			4 11 Tt 11			
H. Na	ature of business o	r purposes to be conducted	a or p	romoted in Florida:R	<u> </u>		
77	RADBINE	OF DIFFUR	<u>r</u>	ALCETS		·············	
		A Parameter State of the State					
	Sig	nature of a member or of	auth	orized representative of a member.			
	(In	accordance with section 608.408(3	3), F.S.,	the execution of this document constitutes			
	an	_		that the facts stated herein are true.)			
	-	Typed or prin		ome of signee			

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
GLOTRADICO ILC.		<del></del>
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:		<b></b>
ALEJANDRO JARAMILLO (Name)	09 OCT -	7
Florida Street Address (P.O. Box NOT ACCEPTABLE)	RY OF STA	ED
HOWEY IN THE HILLS FL 34737 City/State/Zip	RIDA	•

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 608, Florida Statutes.

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "GLOTRADECO LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED

SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED

TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2006, AT 9:09 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "GLOTRADECO LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4209744 8310

090904750

AUTHENTICATION: 7563845

DATE: 10-02-09

You may verify this certificate online at corp.delaware.gov/authver.shtml