

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : Vcorp SERVICES, LLC  
Account Number : 12008000067  
Phone : (845)425-0077  
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\*\*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.**  
**G2A Jotelulu LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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TALLAHASSEE, FL

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

G2A JOYTELULU LLC

(Must end with the words "Limited Liability Company," "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:**

1820 N Corporate Lakes Blvd, Ste 205  
Weston, FL 33326

**Mailing Address:**

1820 N Corporate Lakes Blvd, Ste 205  
Weston, FL 33326

**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:

G2A PARTNERS LLC

Name

1820 N Corporate Lakes Blvd, Ste 205

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

Weston Florida 33326

City State 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 (REQUIRED)

(CONTINUED)

Page 1 of 2

**ARTICLE IV-**

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

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Alcides Ferreira Filho 1820 N Corporate Lakes Blvd, Ste 205 Weston, FL 33326
MGR	Americo Masiello Junior 1820 N Corporate Lakes Blvd, Ste 205 Weston, FL 33326
MGR	Eduardo Karrer 1820 N Corporate Lakes Blvd, Ste 205 Weston, FL 33326
MGR	Eduardo Muller Borges Calle Dario Aparicio, 16D Valdemarin, Madrid - CP 28023, Spain

(Use attachment if necessary)

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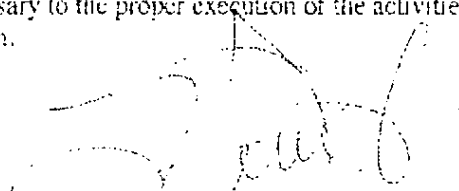
**ARTICLE V:** Effective date, if other than the date of filing: (OPTIONAL) **(If an effective date is listed, the date must be specific and cannot be more than five business days prior to 90 days after the date of filing.)**

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

Members authorize listed above Managers, for and on behalf of the Company, to execute on an individual and solely basis, the establishment and maintenance of relationship with Financial Institutions and Government Agencies to open and movement banking accounts and proper tax filings and all other relationship necessary to the proper execution of the activities within the objectives of the Company in the USA and Spain.

**REQUIRED SIGNATURE:**



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware 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.

Alcides Ferreira Filho

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$30.00 Certified Copy (Optional)
- \$5.00 Certificate of Status (Optional)