# L04000069113

(Req	uestor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



700041061867

09/17/04--01056--027 \*\*125.00



### CREDIT FIX USA

Credit Restoration Specialists creditus@bellsouth.net

8500 S.W. 8 Street, Suite 204 Miami, Florida 33144, U.S.A.

Ph. (305) 261-8000 Fax (305) 261-9000 1-877-5-SAVE ME 1-888-271-8485

September 13, 2004

Florida Department of State Registration Section Division of Corporation P.O. BOX 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find the following documents:

1. Original article of organization for CCS INTERGROUP, L.L.C. , and check #125 for \$125.00 to appropriate fee.

If you have any question, please do not hesitate to call us at (305) 261-8000.

Truly yours,

Emma Fajardo (

O4 SEP 17 PM 2: 49

## ARTICLES OF ORGANIZATION FOR CCS INTERGROUP, L.L.C. FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: CCS INTERGROUP, L.L.C.

#### **ARTICLE II - Address:**

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

**Principal Office Address:** 

**Mailing Address:** 

16473 NE 26 AVENUE N. MIAMI BEACH, FL 33160 16473 NE 26 AVENUE N. MIAMI BEACH, FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent Signature:

The Name and the Florida street address of the registered agent are:

CARLOS A. CARRERO 16473 NE 26 AVENUE N. MIAMI BEACH, FL 33160

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..

Registered Agent's Signature

#### ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

**Managing Member** 

Carlos A. Carrero 16473 NE 26 Avenue

N. Miami Beach, FL 33160

Manager

Carlos A. Carrero 16473 NE 26 Avenue N. Miami Beach, FL 33160

REQUIRED SIGNATURE:

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carlos A. Carrero

Typed or printed name of signee

OL SEP 17 PH 2: 49