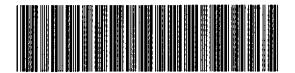
112000132432

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/State/2)p// Notice ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



300240572723

10/09/12--01021--015 **160.00

ZIIZ OCT 17 AM 80 33 SECRETARY OF STATE SALL AHASSEF, FLORIO

Constant

T. CLINE

OCT 18 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 10, 2012

CARLOS CHARRIA 5758 SW 27 STREET MIAMI, FL 33155

SUBJECT: C & V CONSULTING, LLC.

Ref. Number: W12000052094

We have received your document for C & V CONSULTING, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as for it is not distinguishable from the name of an existing entity. Section 608.406; Florida Statutes, was amended effective July 1, 2007, to require the name of all imited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is L10000105487.

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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 412A00025109

www.sunbiz.org

COVER LETTER

Division of Corporations	
SUBJECT: C & V Consulting Services, LLC.	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Carlos Charria	
Name of Person	
C & V Consulting Services, LLC.	
Firm/Company	
5758 SW 27 Street ∑் ≥	
Address C 2	
Miami, FL 33155	÷r
City/State and Zip Code	
CGCHARRIA@GMAIL.COM 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:	
Carlos Charria _{at (} 786 ₎ 281-1414	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
C & V Consulting Services, 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:	Mailing Address:
5758 SW 27 Street	5758 SW 27 Street
Miami, FL 33155	Miami, FL 33155

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:

	City, State, and Zip	2121 2121	ထု	الريبا
Miami	_{FL} 33155	<u> </u>	P.	[]
	Florida street address (P.O. Box NOT acceptable)	ASSE ASSE	~-4	54
3730	JW 21 Juleet	設立		چيان درماناني چارن ساوي
5758	SW 27 Street	<u>:=</u> :=		3 }
	Name	7-24		
Carlos (Charria	≩લ્લ	7912	

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

MGR" = Manager MGRM" = Managing Member	
WORW — Wanaging Weinder	
resident, CEO	Carlos Charria
	5758 SW 27 Street
	Miami, FL 33155
reasurer, CFO	Victor Charria
	6165 SW 130 Avenue Apt. # 1305
	Miami, FL 33183
irector of Sales	Valerie Charria
	5758 SW 27 Street
	Miami, FL 33155
ective date is listed, the date must be	date of filing: (OPTIONAL) specific and cannot be more than five business days p
E V: Effective date, if other than the c	
E V: Effective date, if other than the coctive date is listed, the date must be	
E V: Effective date, if other than the cective date is listed, the date must be ays after the date of filing.)	
E V: Effective date, if other than the cective date is listed, the date must be ays after the date of filing.)	
E V: Effective date, if other than the certive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE:	specific and cannot be more than five business days p
E V: Effective date, if other than the certive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE:	
E V: Effective date, if other than the octive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608, constitutes an affirmation under I am aware that any false information.	or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the octive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under the section of the sectio	ror an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State, as provided for in s.817.155, F.S.)
E V: Effective date, if other than the coctive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under I am aware that any false information constitutes a third degree felony	specific and cannot be more than five business days p or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.) Carlos Charria
E V: Effective date, if other than the octive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under to I am aware that any false information constitutes a third degree felony	ror an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.) Carlos Charria
E V: Effective date, if other than the coctive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under I am aware that any false information constitutes a third degree felony	or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State, as provided for in s.817.155, F.S.) Carlos Charria
E V: Effective date, if other than the octive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under to I am aware that any false information constitutes a third degree felony	or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State, as provided for in s.817.155, F.S.) Carlos Charria
E V: Effective date, if other than the coctive date is listed, the date must be ays after the date of filing.) EQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under I am aware that any false information constitutes a third degree felony Typ Filing Fees:	ror an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of States as provided for in s.817.155, F.S.) Carlos Charria Ped or printed name of signee