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### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2012

WILLIAM ANDRES CASTRO CORNERSTONE SERVICES GROUP LLC. 4583 EMERALD VISTA A303 LAKE WORTH, FL 33461

SUBJECT: CORNERSTONE SERVIVES GROUP LLC.

Ref. Number: W12000052724

We have received your document for CORNERSTONE SERVIVES GROUP 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):

The name designated in your document is unavailable since it is the same as, or 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 a limited 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".

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sean Toner Senior Section Administrator

Letter Number: 612A00025367

PLEASE PROCESS ENCLOSED DOCUMENTS REPLACING PREVIOUS REGISTRATION APPLICATION. THANKS.

www.sunbiz.org

# **COVER LETTER**

TO:	Registration S Division of Co			•	
SUBJI	Corr	nerstone Serv	ices Bure	au LLC	)•
			ed Liability Compar		<del>,, ,, , , , , , , , , , , , , , , , , </del>
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.		
Please	return all corresp	ondence concerning this matt	ter to the following:		
	William	Andres Cast	ro		
		-	Name of Person		
	Corner	stone Service	s Bureau	LLC.	* .* .*
			Firm/Company		
	4583 E	merald Vista	#A303		
			Address		
	Lake W	orth FL, 3346	61		
		Cit	y/State and Zip Code		
		E-mail address: (to be used	for future annual repor	t notification)	<del></del>
For fur	ther information	concerning this matter, please	call:		
Wil	lliam Ca	stro	_at (786)	470-48	48
	Name	of Person	Area Code &	& Daytime Telepl	
Enclos	sed is a check f	or the following amount:			
<b>■\$</b> 125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Certified Cop (additional copy	y	\$160.00 Filing Fee, Certificate of Status & Certified Copy - (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporations	rcle

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
CORNERSTONE SERVICES BUREAU LLC.		
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
4583 EMERALD VISTA #A303 LAKE WORTH FL 33461	4583 EMERALD VISTA #A303	
PARE TORTIFIE SOLOT	Exte Working Court	
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Re business entity with an active Florida registration.) The name and the Florida street address of the  WILLIAM ANDRES CASTRO  Nar	gistered Agent. You must designate an individ e registered agent are:	lual or another
4583 EMERALD VISTA #A303		TED TED
· · · · · · · · · · · · · · · · · · ·	address (P.O. Box NOT acceptable)	နောင် မှ
LAKE WORTH	<sub>FL</sub> 33461	
City,	State, and Zip	e e e e e e e e e e e e e e e e e e e
Having been named as registered agent and i liability company at the place designated i registered agent and agree to act in this cap all statutes relating to the proper and comp and accept the obligations of my position as	in this certificate, I hereby accept the acity. I further agree to comply wit lete performance of my duties, and is registered agent as provided for in	e appointment as h the provisions of l am familiar with

(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Widney — Wanaging Weinoci	
MGR	WILLIAM ANDRES CASTRO
	4583 EMERALD VISTA #A303
	LAKE WORTH FL 33461
MGRM	YESICA ROMINA TRENCO
	4583 EMERALD VISTA #A303
	LAKE WORTH FL 33461
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(1)	
(Use attachment if necessary)	
TEV. Effective data if other th	an the date of filing: (OPTIONAL)
	must be specific and cannot be more than five business d
o or 90 days after the date of fili	
or you days affect the date of the	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	Muse
Signature of a n	nember or an authorized representative of a member.
_	on 608 408(3). Florida Statutes, the execution of this document
THE ACCUMULES WITH SECTION	ON DOMESTON DE CHOICA MARCIES. INC EXECUTION OF THIS GOVERNMEN

(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. 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.)

### WILLIAM ANDRES CASTRO

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)