

✓
L14000003803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

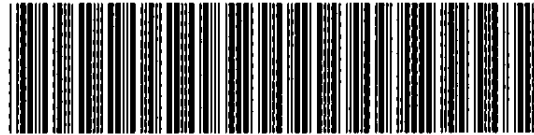
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W13-69064

Office Use Only



900209782519

EFFECTIVE DATE 01-01-14

01/08/14--01027--003 **125.00

2013 DEC 30 PM 12:50
TALLAHASSEE, FL
FALL WASSER, FL

NO\$

JAN 8 2013

PER

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: C & S Business Solutions 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 Ferlini

Name of Person

C&S Business Solutions

Firm/Company

7900 Miami Lakes Dr., Ste 302

Address

Miami Lakes, FL 33016

City/State and Zip Code

carlos_ferlini@us.aflac.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Ferlini

Name of Person

at **818 634-9824**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2013 OCT 30 PM 12:50
TALLAHASSEE, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C&S BUSINESS SOLUTIONS 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:

7900 Miami Lakes Dr.

Suite 302

Miami Lakes, FL 33016

Mailing Address:

7900 Miami Lakes Dr.

Suite 302

Miami Lakes, FL 33016

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:

Juan Carlos Ferlini

Name

18361 NW 10th St.

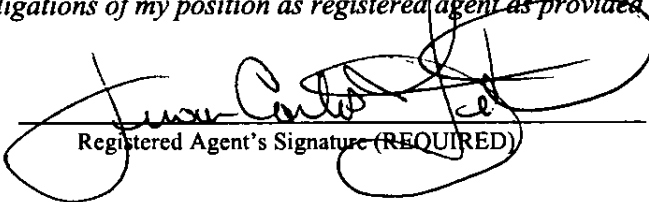
Florida street address (P.O. Box **NOT** acceptable)

Pembroke Pines, FL 33029

City, State, and Zip

2013 DEC 30 PM 12:50
FALLA SETH, FLORENCE

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)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Juan Carlos Ferlini

18361 NW 10 St.

Pembroke Pines, FL 33029

MGRM

Sylvia Ferlini

18361 NW 10th St.

Pembroke Pines, FL 33029

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1-1-2014 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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. 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.)

JUAN CARLOS FERLINI

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2013

CARLOS FERLINI
7900 MIAMI LAKES DRIVE
SUTIE 302
MIAMI LAKES, FL 33016

SUBJECT: C&S BUSINESS SOLUTIONS LLC
Ref. Number: W13000069064

2013 DEC 30 PM 12:50
TALLAHASSEE, FLORIDA

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

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 013A00028759