## Tivisiön of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 12000000019

Phone : (305)552-5973

Fax Number

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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.\*\*

Email Address:

## FLORIDA LIMITED LIABILITY CO. CCI ESPANOL LLC.

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## ES OF ORGANIZATION

**ARTICLE I - Name:** 

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

CCI Espanol LLC.

**ARTICLE II - Address:** 

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

901 fonce de Leon Blrd. 10th Floor. Corol Gobles, Fl 33134

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (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.)

Iverte letrovich.
901, fonce de Leon Blvd.
10 to Floor.
Coral Gables, Fl. 33136

ARTICLE IV-

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

JAVIER GOMEZ (25 %) MER M. Iverre Petrovich (25 %) MER M.

CCI Ine, a Colifornia Corp. (50%) Har H.

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## Required Signatures:

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Signatur	e of a mer	nber or an au	thorized represe	entative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics 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.

Typed or printed name of signce

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..

istered Agent's Signature (REQUIRED)

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