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## **COVER LETTER**

Registration Section

TO:

Division	of Corporations		
SUBJECT:	Bernales (	<del></del>	Resources
	Name of Lin	nited Liability Company	
The enclosed Artic	eles of Organization and fee(s) ar	e submitted for filing.	
Please return all co	rrespondence concerning this ma	atter to the following:	
	Giuliana	F. Berno	ales
-		Name of Person	
	Bernales	Consulting	Resources
		Firm/Company	
	800 N Mian	ni Ave Ap	+ 1508
	•		
	Mian Gluliana E-mail address: (to be used	i, FL 33	136 70 7
	C	ity/State and Zip Code	1. com AHA LLL 23 Potification)
	gluliana	DP @ gma	11.00M
For further informa	tion concerning this matter, plea	se call:	
Giuliana	Bernales at (	786 760	-2265 3
Λ	lame of Person	Area Code Daytii	me Telephone Number
Enclosed is a check	for the following amount:	·	
l \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclo	Certificate of Status &
R	failing Address egistration Section bivision of Corporations	Street/Courie Registration Se Division of Co	ection
P	O. Box 6327 allahassee, FL 32314	Clifton Buildin	ng e Center Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Bernales Consulting Resources LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "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:
800 N Miami Ave Apt. 1508 800 N Niami Ave Apt 1508 Niami FL 33136 Miami FL 33136
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:
Giuliana F. Bernaks  Name  800 N Miami, Apt 1508
Name
800 N Miami, Apt 1508
Florida street address (P.O. Box NOT acceptable)
Miami FL 33136
City Zip -
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  Registered Agents Signature (REQUIRED)
(CONTINUED)
Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Giuliana F. Bernales
President = PSD	800 N Mione Ave Apt 1508 Mione FL 33136
<del></del>	
<u> </u>	
<del></del>	·
EV: Effective date, if other than the date of fective date is listed, the date must be specification.	iling: (OPTIONAL) c and cannot be more than five business days prior to or 90 (
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E V: Effective date, if other than the date of fective date is listed, the date must be specific filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (In accordance with section 605.02)	or an authorized representative of a member.
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