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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : ARIAS TOVAR & ASSOCIATES, P.A.
Account Number : I200000000125
Phone : (954) 385-2284
Fax Number : (954) 385-8864

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**FLORIDA LIMITED LIABILITY CO.
5 CS CONSULTING GROUP, LLC**

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| Certificate of Status | 0 |
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ARTICLES OF ORGANIZATION
OF
5 CS CONSULTING GROUP, LLC

The Undersigned, as a member or an authorized representative of a member of the Company, pursuant to Chapter 605, Florida Statutes, files the following Articles of Organization establishing a Florida Limited Liability Company named **5 CS CONSULTING GROUP, LLC**

ARTICLE I: NAME

The name of the Company shall be: **5 CS CONSULTING GROUP, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this Company shall be:

80 SW 8th ST. #2074 Miami, FL 33130

ARTICLE III: DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV: PURPOSE

This company is organized primarily to engage in general investments, international trade, consulting services and other commercial activities, as well as to conduct any other lawful business in the United States and abroad.

ARTICLE V: MANAGEMENT

The Company shall be managed by one or more members and is therefore a member-managed company. The initial member-manager of the Company shall be its only member to hold office until her successors have been duly qualified and elected, or until his/her earlier resignation, removal from office or death.

The number of members and managers may increase or decrease in accordance with the procedure stated in the By-Laws of the company or the Membership Agreement.

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The name and address of the initial Member - Manager is:

Maria M. SOCI DE CONDE 80 SW 8th ST. #2074 Miami, FL 33130

ARTICLE VI: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial Registered Agent is:

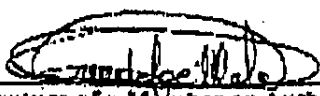
Ileana Arias Tovar, Esq.
Arias Tovar & Associates, PA.
2250 NW 136th Avenue
Pembroke Pines, FL 33028

Having been named as registered agent and to accept service of process for the above stated 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.



Signature of Registered Agent

Date: Sept 04, 2014



Signature of a Member or Authorized Representative of a Member
Maria M. SOCI DE CONDE

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