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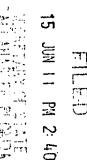
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	Registration S Division of Co							
SUBJEC		nsulting Solutions, LLC						
SUBJEC	· I ·	Name of I	Limited Liabil	ity Company				
The encl	osed Articles o	of Organization and fee(s)	are submitted	for filing.				
Please re	turn all corres	condence concerning this	matter to the	following:				
	Michelle H	ambidge						
			Name of	Person				
	C&A Cons	ulting Solutions, LLC						
	<u> </u>	·	Firm/Co	mpany			_	
	10 Burma l	Place						
			Addr	ess		2775	_ 5	
	Palm Coas	t, FL 32137				4-1-1	MUL	ন্
	michelle@c	aconsultingsolutions.com	City/State an	d Zip Code		21.		
		E-mail address: (to be us	ed for future a	nnual report notification	on)		· 空 ?	
For further	information c	oncerning this matter, ple	ase call:			100 mm	. 40	
	Michelle Ha	ambidge at (321	652-8513				
	Nar	me of Person	Area Code	Daytime Telephone	Number			
Enclosed	is a check for	the following amount:						
	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Fil Certificate Certified C (additional co	of Status opy	&)
	Regis Divis P.O. 1	ing Address tration Section ion of Corporations Box 6327 hassee, FL 32314		Street Address Registration Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, FL 3230	r Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: C&A Consulting Solutions, LLC (Must end with the words "Limited Liability Company is:	ompany, "L.L.C.," or "LLC.") FILED 15 JUN 11 PH 2: 40
ARTICLE II - Address: The mailing address and street address of the principal office of the L	Limited Liability Company is:
Principal Office Address:	Mailing Address:
10 Burma Place Palm Coast, FL 32137	Same
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered A another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Michelle Hambidge Name	
10 Burma Place Florida street address (P.O. Box I	NOT acceptable)
Palm Coast FL	32137
City State	Zip
Having been named as registered agent and to accept service of process place designated in this certificate, I hereby accept the appointment as refurther agree to comply with the provisions of all statutes relating to the am familiar with and accept the obligations of my position as registered Registered Agent's	egistered agent and agree to act in this capacity. I proper and complete performance of my duties, and I agent as provided for in Chapter 605, F.S Signature (REQUIRED)

Page 1 of 2

ARTICLE IV-

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

Title:	wale and the old Moundam	Name and Address:	
	uthorized Member		
"MGR" = Mat	nager	Michelle Hambidge	
AMBR		10 Burma Place	
		Palm Coast, FL 32137	
		Talli Coast, PL 32137	
			
	 		· · · · · · · · · · · · · · · · · · ·
			
			
			
			
(Use attachme	ent if necessary)		
u nas na	a data if athor than the data	of Stimes July 1 2016 (ORTION	AT.)
	e date, if other than the date	of filing: July 1, 2016 (OPTION ecific and cannot be more than five business days prior	AL)
e of filing.) If the date insert	ted in this block does not nove date on the Department	neet the applicable statutory filing requirements, this dat of State's records.	e will not be
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