L15000156619

(Requestor	's Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business I	Entity Name)
(Document	Number)
Certified Copies C	ertificates of Status
Special Instructions to Filing O	fficer:
WIS-57703	3

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COVER LETTER

	Registration Section Division of Corporations
SUBJECT	P.C. Consulting Group. LLC,
SUBJECT	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please rett	arn all correspondence concerning this matter to the following:
	Christopher Berg
	Name of Person
	On point Construction, Inc.
	Firm/Company
	8672 S.W 40th St Suite 202
	Address
	Miami FL,33155
	City/State and Zip Code
	Cberg@opcbuilders.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Christopher Berg 786 3898671
	Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
\$125.00 F	

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2015

5. 1

CHRISTOPHER BERG 8672 S.W. 40TH ST SUITE 202 MIAMI, FL 33155

SUBJECT: P.C. CONSULTING GROUP, LLC.

Ref. Number: W15000057703

We have received your document for P.C. CONSULTING GROUP, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 215A00018305

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVEL

ARTICLE I - Name:

The name of the Limited Liability Company is:

15 SEP -8 PM 4: 24

		The state of the s	•
	P.C. Consulting & Management, LLC.	SECTION OF	
	(Must end with the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.") SECRETARY OF STATE AND ADDRESSED. FI.ORIC	Ï
ARTICL	E II - Address:		
The mailing	ng address and street address of the principal office of the I	Limited Liability Company is:	
	Principal Office Address:	Mailing Address:	

8672 S.W 40th St	8672 S.W 40th St	
Suite 202	Suite 202	•
Miami, FL 33155	Miami, FL 33155	

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:

Christopher Berg		
	Name `	
8672 S.W 40th St	Suite 202	
Florida street add	ress (P.O. Box NOT a	cceptable)
Miami	FL	33155
City	State	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..

ı	Christopher Berg Christopher German Company of the
	Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	n authorized to manage and control the Limited Liability Company: OF STATE Name and Address:
"MGR" = Manager AMBR	Christopher Berg
	8672 S.W 40th st Miami FL,33155
AMBR	Paul Thompson 8672 S.W 40th st Miami FL,33155
,	
•	
(Use attachment if necessary)	
EV: Effective date, if other than the	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 days after
of filing.)	not meet the applicable statutory filing requirements, this date will not be listed as
E VI: Other provisions, if any.	
E VI: Other provisions, if any.	

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)

Christopher Berg