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### **COVER LETTER**

	New Filing Section Division of Corporations					
SUBJEC	CMRV Business Consulting, LLC					
00000	Name of Limited Liability Company					
The encl	osed Articles of Organization and fee(s)	) are submitted	l for filing.			
Please re	turn all correspondence concerning this	matter to the	following:			
	Stephanie Pulley					
		Name o	f Person			
		<u> ;</u>		<u></u>		
	PO Box 4107					
		Address				
	Lakewood. CA 90711					
		City/State ar	nd Zip Code			
	E-mail address: (to be u	sed for future	annual report notificat	ion)		
For further	r information concerning this matter, ple	ease call:				
	Christel Renaud	912	484-0498			
	Name of Person	Area Code	Daytime Telephon	e Number		
Enclosed	is a check for the following amount:					
■\$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status		Certif	i5.00 Filing Fee & icd Copy all copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address  New Filing Section  Division of Corporations P.O. Box 6327		Street Address New Filing Section Division of Corporati	ions		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Organization for CMRV Business Consulting, LLC

### Article I - Name

The name of the limited liability company is CMRV Business Consulting, LLC

### **Article II - Address**

The physical address of the principal office of the Limited Liability Company is 2987 SW 25th St.

Miami, FL 33133

The mailing address of the Limited Liability Company is

2987 SW 25th St.

Miami, FL 33133

# Article III - Purpose

The purpose for which the Limited Liability Company is organized is to engage in any and all businesses and activities permitted by the laws of the state of Florida. The Limited Liability Company shall have all of the powers vested in a Limited Liability Companies organized and existing by virtue of such laws, including, but not limited to, the power to purchase goods.

# **Article IV - Registered Agent**

The name and address of the initial registered agent in Florida for the Limited Liability Company is

Christel Renaud

2987 SW 25th St.

Miami, FL 33133

Having been named as registered agent and to accept service the process for the above stated Limited Liability Company at the place designated in this certificate. I hereby accept the appointment as a registered agent and agree to act in this capacity. I further agreed to comply with the provisions of all statues 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 chapters 605, F.S.

Registered Agent's Signature

# **Article V - Management**

The Limited Liability Company is to be managed by managing member(s). The name and address of the initial managing member who will serve as such until a successor or successors are elected and qualifies, are the following

Title: Authorized Member Christel Renaud 2987 SW 25th St. Miami, FL 33133

### **Article - VI Duration**

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these Articles of Organization or the Operating Agreement.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. Lam 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.

-Christel Renaud, Member