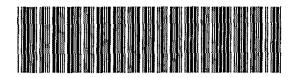
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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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SCCRETARY OF SHALL

COVER LETTER

TO: Registration Division of C			
SUBJECT:	Charrioll Bu	ISINESS Services ited Liability Company)	LLC
Florida," Certificate		~ ~ -	orization to Transact Business in love referenced foreign limited
Please return all con	respondence concerning this n	natter to the following:	
**************************************	MichAEI LA	SAIA	
	(Na	ume of Person)	
	(Fi	rm/Company)	,
_6	27 Sterling Dri	ve Cheyenne, u (Address)	Jy. 82009
	City/st	. 82009 rate and Zip Code)	······································
For further informat	ion concerning this matter, ple	ease call:	
_Mich	(Name of Person)	at (<u>702</u>) <u>94</u> (Area Code & Dayt	10-9845 ime Telephone Number)
MAILING A Division of O P.O. Box 632 Tallahassee,	Corporations 27	STREET ADDRESS: Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	
Enclosed is a check \$125.00 Fili	for the following amount: ng Fee \$\sum \\$130.00 \text{Filing Fee & Certificate of}	\$155.00 Filing Fee & Status Certified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Cop

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBTLIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	MITTED TO REGISTER A FOREIGN
1. Charriol Business Services, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company	<u>.</u>
(Name of Foreign Limited Liability Company; must include "Limited Liability Company	y," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Flo	orida and attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name Company," "L.L.C.," "LLC.")	must menute Emmed Emonny
	V LUMA
2. Usomina 3. 26-052 (Jurisdiction under the law of which foreign limited liability) (FEI number,	(/44
company is organized)	applicable)
4. 1107 2005 5. perpetu	A
(Date of Organization) (Duration, 1 car inities na	bility company will cease to
exist or "perpetual")	F 375
6.	₹ \$90
(Date first transacted business in Florida, if prior to registration.)	<u> </u>
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	27
7.	77
 8. If limited liability company is a manager-managed company, check here ✓ 9. The name and usual business addresses of the managing members or manage Michael LaSala, manager 	ers are as follows:
629 Sterling Drive Cheyenne,	11/11 82000
_ car siefing Drive (negrinie,	Wy AROUT
	<i>O</i>
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate translation of the certificate under eath of the translation must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	2ucinass
11. Nature of business or purposes to be conducted or promoted in Florida:	DADIMESS
Services, Business Consultants.	_
Services, Business Consultants.	
	a mambar
Signature of a member or an authorized representative of (In accordance with section 608.408(3), F.S., the execution of this document	
an affirmation under the penalties of perjury that the facts stated herein are	
Mirhael LaSala	
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	f the Limited Liability Company is:
Charrioll I	Business Services, LLC
If name unavai	lable, the alternate name to be used in the state of Florida is:
2. The name a	Eunice Gallets (Name) 2825 SW 22nd Ave. Ste. 105 Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Delray Beach FL 33445 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 608, Florida Statutes.

Eurice Gallets.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE OF

State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

ss.

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that CHARRIOLL BUSINESS SERVICES, LLC, a limited liability company organized under the laws of the State of Wyoming, did on 11/07/2005, file its Articles of Organization in the Office of the Secretary of State of Wyoming, and is in good standing at the date of this certificate.

I FURTHER CERTIFY that this certificate is not to be construed as an endorsement, recommendation, or notice of approval of the limited liability company's financial condition or business activities and practices, as this information is not available from the records of this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 7th day of November A.D., 2005.



Secretary of State

By Candin Dillmon