# M130000001937

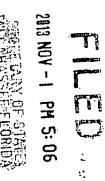
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W13-49188
W13-50489

Office Use Only



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D. BRUCE



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 12, 2013

NIDIA CRISTINA MARULANDA 8230 NW 191ST STREET, 26E MIAMI, FL 33015

SUBJECT: CS INTERNACIONAL, LLC

Ref. Number: W13000050489

We have received your document for CS INTERNACIONAL, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

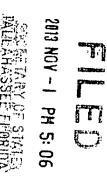
The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return 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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 213A00021477





### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 5, 2013

NIDIA CRISTINA MARULANDA 8230 NW 191ST STREET, APT 26E MIAMI, FL 33015

SUBJECT: CS INTERNACIONAL, LLC

Ref. Number: W13000049188

We have received your document for CS INTERNACIONAL, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$130.00.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return 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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 413A00020960

2013 NOV -1 PH 5: 0

CR2E027 (9/10)

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

TNTERNACIONAL, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Enclosed is a check for the following amount:

\$\Bigsim \mathbb{\text{\$130.00 Filing Fee & Certificate of Status}}\$

Please return all correspondence concerning this matter to the following:	
Nidia "Cristina" M	ARULANDA
Name of Person	
CS INTERNACION Firm/Company	VAL, LLC
8230 NW 191st Stre	et 26E
Miami/Florida City/State and Zip Cod	/ 33015 P P TI
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, please call:	PH 5: 06
Nidia "Cristina" Manulanda at (786	1489-1250 F
Name of Person Area Code & Daytin	ne Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CenterTallahassee, FL 32301	-

□ \$155.00 Filing Fee &

Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
·
1. CS International, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  3. 463055360 (FEI number, if applicable)
4. Chate of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 8230 NW 191st Street Apt 26E  Miami FL 33015  (Street Address of Principal Office)
Miami, FL 33015
(Street Address of Principal Office)  3. If limited liability company is a manager-managed company, check here   3. The name and usual business addresses of the managing members or managers are as follows:
Nidia Cristina Makulanda
Steve Gaskill
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)
1. Nature of business or purposes to be conducted or promoted in Florida:
Export to Latin America
Export to Latin America  Latin America  Lo-Owner
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am 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.)
Steve Gaskill Typed or printed name of signee
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.

CS Internacional, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:  Nidia Cristina Marulanda	
8230 NW 191st Street Apt 26E	
(Name)	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
A STATE OF S	E.,.
Miami FL 33015 8	

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.

Stand Standard (Signature)

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

## Delaware

PAGE :

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CS INTERNACIONAL, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINTH DAY OF AUGUST, A.D. 2013.

5355520 8300

130973642

Jeffrey W. Bullock, Secretary of State AUTHENTY CATION: 0655161

DATE: 08-09-13

You may verify this certificate online at corp.delaware.gov/authver.shtml

## Delaware

PAGE 3

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