M14000005672

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





000262387250

07/28/14--01066--003 **155.00





July 29, 2014

RAUL SAENZ 6405 NW 36 ST SUITE 112 MIAMI, FL 33166

SUBJECT: FACEB CONSULTING, CA, LLC

Ref. Number: W14000046322

We have received your document for FACEB CONSULTING, CA, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the name and address of the secretary in #7.,

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) 245-6051.

Letter Number: 914A00016180

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

COVER LETTER

	Registration Section Division of Corporations						
SUBJEC	FACEB CO	NSULTING, SA	, LLC				
SOBOLEC	Name of Limited Liability Company						
					sact Business in Florida," Certifica company to transact business in Fl		
Please ret	urn all correspondence cor	ncerning this matter	to the following:				
	Raul M S	Saenz CF	PA				
	· · · · · · · · · · · · · · · · · · ·		Name of Person		· · · · · · ·		
	Saenz &	Associa	tes CPA's P	P.A			
	-		Firm/Company		· ····		
	6405 NV	V 36 Stre	et, Suite 11	2			
	 		Address		······································		
	Miami, F	L 33166					
			City/State and Zip Code				
	Raul.sae	enz@cpa	sconsultants	s.com	1		
		E-mail address: (to	be used for future annual re	port notificat	on)		
For furthe	er information concerning	this matter, please o	all:				
	Raul M Sae	nz	at (305	_、 796	-9600		
-	Name of	Contact Person	Area Code	Dayt	ime Telephone Number		
] F F	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314	Ī F C 2	TREET ADDRESS: Division of Corporations Registration Section Clifton Building 661 Executive Center Cir Callahassee, FL 32301	rcle			
	d is a check for the fo ☐ \$125.00 Filing Fee	llowing amount: ☐ \$130.00 Filing F Certificate of Sta	ee & 🔳 \$155.00 Filin	-	□ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alter iability Company," "L.L.C," or "LLC.")	mate name must include "Li	mited
Panama		
(Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if	applicable)	_
·	•	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		_
10131 SW 139 Street	<u> </u>	
	150 a	
(Street Address of Principal Office)	= = = = = = = = = = = = = = = = = = = =	_ :
	SS = 6	, at 100 and
Miami, FL 33176		_: ; :
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(Mailing Address)	क्षांक क्ष	
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,	to manage is/are:	
The name, title or capacity and address of the person(s) who has/have authority		
The name, title or capacity and address of the person(s) who has/have authority ecretary:		_
The name, title or capacity and address of the person(s) who has/have authority ecretary:		
The name, title or capacity and address of the person(s) who has/have authority ecretary: Eusebe		 -
The name, title or capacity and address of the person(s) who has/have authority ecretary:		
The name, title or capacity and address of the person(s) who has/have authority ecretary: Tuarez Eusebe 2131 SW 139 Sheet, Miami, F1. 33	176	_
The name, title or capacity and address of the person(s) who has/have authority ecretary: Traces Eusebe 2131 SW 139 Sheet, Miami, F1. 33 Attached is an original certificate of existence, no more than 90 days old, duly an	athenticated by the of	– ficial
The name, title or capacity and address of the person(s) who has/have authority ecretary:	athenticated by the of (A photocopy is not	– ficial
The name, title or capacity and address of the person(s) who has/have authority ecretary:	athenticated by the of (A photocopy is not	– ficial
The name, title or capacity and address of the person(s) who has/have authority ecretary: Tuase Eusebe O131 SW 139 Sheet, Miami, F1-33 Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organized, ceptable. If the certificate is in a foreign language, a translation of the certificate is	athenticated by the of (A photocopy is not	– ficial
The name, title or capacity and address of the person(s) who has/have authority ecretary: Tuase Eusebe O131 SW 139 Sheet, Miami, F1-33 Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organized, ceptable. If the certificate is in a foreign language, a translation of the certificate is	athenticated by the of (A photocopy is not	– ficial
The name, title or capacity and address of the person(s) who has/have authority secretary:	athenticated by the of (A photocopy is not under oath of the tran	– ficial Islato

Juarez Eusebe

Typed or printed name of signes

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name o	f the Limited Liabi	lity Company is:			
FACE	B CONSULTING	S, SA, LLC			_
If unavailable,	the alternate to be	used in the state of Florida is:			
2. The name a	nd the Florida stree	et address of the registered agent and office are:			-
	Saenz & A		7		
		(Name)	22	i G	
	6405 NW 36 Street Suite 112				er arten; i tradit i i i
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			Ľ.	;;
	Miami	_{FL} 33166		:: 3D	W ₁₇₈
		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, Florida Statutes.

Signature)

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

TRANSLATION

REPUBLIC OF PANAMA PUBLIC REGISTRY OF PANAMA

No. 669317

PAG. // REFRPA20 CERTIFIES SIGHTING THE APPLICATION 14 - 1536186 FACEB CONSULTING, S.A. IS FOUND REGISTERED UNDER THE MICROFICHE 837110 DOC. 2624093 SINCE THE TWENTY FIFTH OF JUNE OF TWO THOUSAND FOURTEEN, THAT THE CORPORATION IS CURRENTLY IN GOOD STANDING THAT THE SUBSCRIBERS ARE: 1) MARYORIE BATISTA RIVAS
2) MIRTA MOJICA DE QUINTERO THAT THE DIRECTORS ARE: 1) BAUDILIO DUBEN CARBALLO 2) EUSEBE JUAREZ 3) CYRIL PHILLIPE SEILLIER 4) ARGENIS ANTONIO CANELON COLINA THAT THE DIGNITARIES ARE: **PRESIDENT** : BAUDILIO DUBEN CARBALLO **TREASURER** : CYRIL PHILLIPE SEILLIER : EUSEBE JUAREZ SECRETARY THAT THE LEGAL REPRESENTATION IS EXERCISED BY: THE PRESIDENT WILL BE THE LEGAL REPRESENTANT OF THE CORPORATION AND IN HIS ABSENCE CAN BE ANY EXERCISE BY ANY OF THE DIGNITARIES OR DIRECTORS. THAT ITS REGISTERED AGENT IS: PANAMA OFFSHORE LEGAL SERVICES (POLS) THAT ITS CAPITAL IS OF *******10,000.00 AMERICAN DOLLARS. THAT ITS DURATION IS PERPETUAL THAT ITS DOMICILE IS PANAMA EXPEDITED AND SIGNED IN THE CITY OF PANAMA, THE TWENTY SIXTH OF JUNE OF TWO THOUSAND FOURTEEN, AT 03: 14: 33. P. M. NOTE: THIS CERTIFICATION PAID RIGHTS FOR ONE VALUE OF US\$ 30.00 **VERIFICATION NO. 14 - 1536186** CERTIFICATE NO. S. ANONYMOUS - 073847 DATE: Thursday 26, June OF 2014 // REFRPA20 // (SIGNED) YADINEL ORTEGA CERTIFIER SEAL STAMP5 APOSTILLE (Convention of La Haye of october 5, 1961) 1. Country Panama. In Panama the present public document 2. has been signed by YADINEL ORTEGA 3. who acts in the position of CERTIFIER 4. and it has the seal / stamp of 30 CERTIFICATE 6. the day 03/JULY/2014 5. In Panama 7. by ADMINISTRATIVE DIRECTIONS 8. Until number 38,528 9. seal / stamp 2 10. Sign (signed) Migdalia de Soto (SEAL)

25 CH 148 8- 904 11: 30

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THE FOREGOING TEXT IS A LITERAL AND FAITHFUL TRANSLATION OF AN ORIGINAL DOCUMENT IN THE SPANISH LANGUAGE REQUESTED BY THE CLIENT. JULY, 2014.





REPUBLICA DE PANAMA REGISTRO PUBLICO DE PANAMA No. 669317

REGISTROPUBHICODEPANAMA REGISTROPUBLICODEPANAMA REGIST PAG. // REFRPA20,// CERTIFICA CON VISTA A LA SOLICITUD 14 -FACEB CONSULTING 'S.A. SE ENCUENTRA REGISTRADA LA FICHA 837110 DCC. 2624093 DESDE EL VEINTICINCO DE JUNIO DE DOS MIL CATORCE . - QUE LA SOCIEDAD SE ENCUENTRA VIGENTE - QUE SUS SUSCRIPTORES SON: 1.) MARYORIE BATISTA RIVAS 2) MIRTA MOJICA DE QUINTERO QUE SUS DIRECTORES SON: 1) BAUDILIO DUBEN CARBALLO 2) EUSEBE JUAREZ 3) CYRIL PHILLIPE SEILLIER 4) ARGENIS ANTONIO CANELON COLINA - QUE SUS DIGNATARIOS SON: PRESIDENTE : BAUDILIO DUBEN CARBALLO TESORERO : CYRIL PHILLIPE SEILLIER SECRETARIO : EUSEBE JUAREZ - QUE LA REPRESENTACION LEGAL LA EJERCERA: EL PRESIDENTE OSTENTARA LA REFRESENTACION LEGAL DE LA SOCIEDAD. Y EN AUSENCIA DE ESTE, LA PODRA EJERCER CUALQUIERA DE LOS DISNATARIOS O DIRECTORES. - QUE SU AGENTE RESIDENTE ES: PANAMA OFFSHORE LEGAL SERVICES (POLS). - QUE SU CAPITAL ES DE ********10,000.00 DOLARES AMERICANDS. - QUE SU DURACION ES PERPETUA - QUE SU DOMICILIO ES PANAMA EXPEDIDO Y FIRMADO EN LA PROVINCIA DE PANAMA , EL VEINTISEI DE JUNIO DEL DOS MIL CATORCE | A LAS 03:14:33.P.M NOTA: ESTA CERTIFICACION PAGO DERECHOS POR UN VALOR DE B/. 30:00 COMPROBANTE NO. 14 -1535186 NO. CERTIFICADO: 5. ANONIMA - 073847 YADINEL ORTEGA FECHA: Jueves 26, Junio DE 2014 CERTIFICADOR // REFRPA20 //

unvenuum de la haye dit 5 tte octobr≇ 1961.

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CERTIFICADO

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5 EN Paname 5 62 Por DIRECCION ADMINISTRATIVA

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REPUBLICA DE PANAMA -3.型.14 B/0000200 P 321423