

L1400018714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

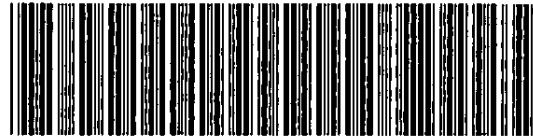
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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D. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EKOPRO USA, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRASILIO F. MACHADO, ESQ.
Name of Person

THE MACHADO LAW FIRM
Firm/Company

14 NE 1ST AVENUE, SUITE 700
Address

MIAMI, FL 33132
City/State and Zip Code

BRASILIO@MACHADOLAW.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRASILIO MACHADO at (305) 400-0867
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I
NAME

The name of the Limited Liability Company is **EKOPRO USA, LLC.**

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:
14101 SW 129 CT.
MIAMI, FL 33186

Mailing Address:
14101 SW 129 CT.
MIAMI, FL 33186

ARTICLE III

Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent are:

THE MACHADO LAW FIRM
14 NE 1ST AVENUE, SUITE 700
MIAMI, FL 33132

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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..

Date: 11/12/14



Registered Agent's Signature

THE MACHADO LAW FIRM
14 N.E. 1ST AVE., SUITE 700
Miami, Florida 33132

ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

AMBR

ROGERIO C. FAGONDES
14101 S.W. 129 CT.
Miami, FL 33186 – USA

AMBR

**ALCUDIA COMERCIO DE BENS E PARTICIPACOES
SOCIETARIAS LTDA.**
Av. Das Americas No. 3301, Bloco02/201
Rio de Janeiro, RJ 22.631-003 – Brazil



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1) (b), Florida Statutes, 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.)

BRASILIO F. MACHADO, ESQ.

Typed or printed name of signee

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