

L16000170340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

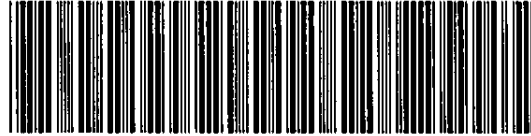
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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9/12/16

Office Use Only



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07/20/16--01009--025 **185.00

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TALL
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[Handwritten signature]

To: Florida Department of State
Division of Corporations

From: Odalys Parra

Reference to: Maria Rivas Ortega & William Rojas Ramirez, Principals
MY.VIAJE.NET LLC & MY VIAJE.NET CORP., Entities

Monday, August 22, 2016

Subject: MY.VIAJE.NET LLC Ref Number W16000053068

To whom it may Concern:

The documents and payment for the LLC was received by the Florida Department of State but was not process because the name is the same or not distinguishable from an existing entity with the same principals - P16000058593.

Through this Maria Rivas Ortega and William Rojas Ramirez want to state that both entities MY.VIAJE.NET LLC AND MY VIAJE.NET CORP. Belong to the same principals, and they want keep both entities with the same name.

Thanks


Odalys Parra, Incorporator.

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2016

ODALYS PARRA
1275 W 47TH PL #105
HIALEAH, FL 33012

SUBJECT: MY.VIAJE.NET LLC
Ref. Number: W16000053068

We have received your document for MY.VIAJE.NET LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is P16000058593.

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) 245-6052.

Matthew T Moon
Regulatory Specialist II

Letter Number: 416A00016027

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: My Viaje. Net LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Domestication of a Non-U.S. Entity and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Odalys Parra
Name of Person

My Viaje. Net LLC
Firm/Company

8388 SW 29 ST UNIT 106
Address

MIRAMAN, Fla 33025
City/State and Zip Code

Odalys @ AATS PARRA. COM
E-mail/address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Odalys Parra at (786) 360-3857
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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ARTICLES OF DOMESTICATION

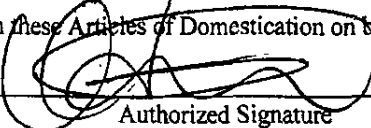
In accordance with 605.1055, Florida Statutes, the Articles of Domestication are submitted for filing:

1. The date on which the entity was first formed was: March 13, 2014
2. The name of the entity immediately prior to the filing of the Articles of Domestication was:
My Viaje.NET CA
3. The effective date of the domestication is: July 13, 2016
(cannot be prior to or 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. Attached are Florida Articles of Organization to complete the domestication requirements pursuant to s. 605.0201.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the entity or any other equivalent jurisdiction under applicable law, immediately before the filing of the Articles of Domestication was: Venezuela
6. The domestication has been approved in accordance with the laws of the jurisdiction of formation of the domesticating entity.

I am authorized to sign these Articles of Domestication on behalf of the entity.


Authorized Signature

7. Attached is a certificate of status or equivalent document, if any, from the domesticating jurisdiction of formation, pursuant to s. 605.1055 (3), Florida Statutes.

Articles of Domestication: \$25
Articles of Organization: \$125
Total to Domesticate and file: \$150

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

My Viaje.net 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:

Odalya Parra
Name of Person

My Viaje.net LLC
Firm/Company

8388 SW 29 ST Unit 106
Address

Miramar, FL 33025
City/State and Zip Code

Odalya@AATSparra.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Odalya Parra
Name of Person

at (786)

360-3857
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:

My Viaje.NET LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:**Mailing Address:**8388 SW 29 ST UNIT 106
MIRAMAR, FL 330251275 W. 47th PL #105
HALEAH, FL 33012**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MARIA RIVAS ORTEGA.
Name8388 SW 29 ST UNIT 106Florida street address (P.O. Box **NOT** acceptable)MIRAMAR

City

FL

33025

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, F.S.

X 

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Member

Member

Name and Address:

MARIA RIVAS ORTEGA
8388 SW 29 ST UNIT 106
MIRAMAR, FL 33025

William Rojas Ramirez
8388 SW 29 ST UNIT 106
MIRAMAR, FL 33025

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: July 13, 2016 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

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

MARIA RIVAS ORTEGA

Typed or printed name of signer

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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