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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MSJV USA HOLDINGS LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

ROBERT SALINAS

Name of Person

MSJV USA HOLDINGS LLC

Firm/Company

1001 N FEDERAL HWY, SUITE 202

Address

HALLANDALE, FL, 33009

City/State and Zip Code

rsalinas@rcbs.biz

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT SALINAS

786

3389000

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 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



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GESTAL, FERNANDO	555 NE 15TH ST	<input type="checkbox"/> Add
		STE 23A	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33132	<input type="checkbox"/> Change
AMBR	VASQUEZ, JORGE	555 NE 15TH STREET	<input type="checkbox"/> Add
		STE 23A	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33132	<input type="checkbox"/> Change
MGR	CAMPITELLI, MATIAS	101 N FEDERAL HWY.	<input checked="" type="checkbox"/> Add
		SUITE 202	<input type="checkbox"/> Remove
		HALLANDALE, FL 33009	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

*[The page contains faint horizontal lines, suggesting it was part of a lined notebook or document.]*

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **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.

Dated OCTOBER 16TH 2019

ROBERT SALINAS

Typed or printed name of signee