

L190000 74655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

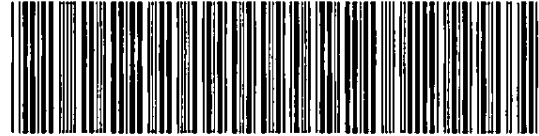
(Business Entity Name)

(Document Number)

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2020 JAN 23 PM 12:47

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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

MSJV USA HOLDINGS LLC

Page 1 of 3

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

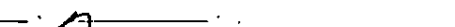
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	SAMPEDRO, MARIANA	555 NE 15TH ST	<input checked="" type="checkbox"/> Add
		STE 23A	<input type="checkbox"/> Remove
		MIAMI, FL 33132	<input type="checkbox"/> Change
AMBR	VASQUEZ, JORGE	555 NE 15TH STREET	<input checked="" type="checkbox"/> Add
		STE 23A	<input type="checkbox"/> Remove
		MIAMI, FL 33132	<input type="checkbox"/> Change
MGR	CAMPITELLI, MATIAS	1001 N FEDERAL HWY,	<input type="checkbox"/> Add
		SUITE 202	<input checked="" type="checkbox"/> Remove
		HALLANDALE, FL 33009	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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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 JANUARY 20TH 2020



Signature of a member or authorized representative of a member

ROBERT SALINAS

Typed or printed name of signer