

L22000490122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

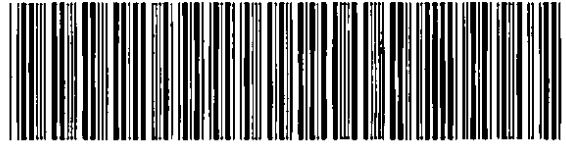
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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S. CHATHAM
NOV 18 2022

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 NOV 14 PM 1:38

RECEIVED
2022 NOV 14 PM 3:05
ALLAHASSEE, FLOR.

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: JAMES 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:

Adriana Macedo / Patricia Canton

Name of Person

Assure International LLC

Firm/Company

801 Brickell Ave, 8th Floor

Address

Miami, FL 33131

City/State and Zip Code

amacedo@assureinternational.com / pcanton@assureinternational.com

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

For further information concerning this matter, please call:

Adriana Macedo	305	2399080
_____ Name of Person	_____ Area Code	_____ Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

incserv

ORDER FORM

TO: Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM: Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE: 11/14/2022

PRIORITY: Regular Approval

OUR REF.# (Order ID#): 1085002

ORDER ENTITY:

JAMES USA LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

JAMES USA LLC (FL)

New LLC filing

NOTES:

\$125.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

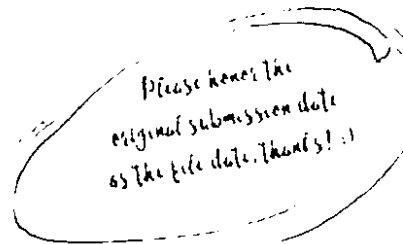


FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 15, 2022

INCSERV

SUBJECT: JAMES USA LLC
Ref. Number: W22000142737



We have received your document for JAMES USA LLC. However, the document has not been filed and is being returned for the following:

The document is illegible and not acceptable for imaging.

Just the last page needs to be corrected.,

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham
Regulatory Specialist II
New Filing Section

Letter Number: 422A00025438

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2022 NOV 17 AM 10:12
ALLA ASSET, FLOR

RECEIVED

Please honor the original submission date as the file date. Thanks! :)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JAMES USA LLC

(Must contain 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:

801 Brickell Ave, 8th Floor

Miami, FL 33131

4581 Weston Road #189

Weston, FL 33331

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:

Assure International LLC

Name

801 Brickell Ave, 8th Floor

Florida street address (P.O. Box **NOT** acceptable)

Miami

FL

33131

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, F.S.

Patricia Canton

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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SECTION 605, F.S.
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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

Name and Address:

MGR

FRANCISCO CESAR ASFOR ROCHIA

15901 Collins Avenue ap 902

SUNNY ISLES BEACH, FL. 33160

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

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.

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) (b), 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.

FRANCISCO CESAR ASFOR ROCHIA

Typed or printed name of signee

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)