

**L23000382510** H230002792173  
 Division of Corporations  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To: Division of Corporations  
 Fax Number : (850)617-6381

From: Account Name : MRP BY WESTON INC  
 Account Number : I20220000089  
 Phone : (954)655-8412  
 Fax Number : (954)655-8412

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
 SUN VIEW PROPERTIES GLOBAL LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED  
 2023 AUG 15 PM 4:41  
 SUN VIEW PROPERTIES

FILED  
 2023 AUG 15 PM 12:55  
 ALLAHABAD, INDIA

Electronic Filing Menu Corporate Filing Menu Help

H 23 000 279 2173

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: SUNVIEW PROPERTIES GLOBAL 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:

FEIJOO FEIJOO, HECTOR E.

Name of Person

Firm/Company

6191 ORANGE DRIVE SUITE 6163G

Address

DAVIE, FL 33314

City/State and Zip Code

MELVASL@HOTMAIL.COM

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

For further information concerning this matter, please call:

MELVA SANCHEZ

954

655-8412

at ( )

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

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

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TALLAHASSEE, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUNVIEW PROPERTIES GLOBAL 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:

6191 ORANGE DRIVE SUITE 6163G  
DAVIE, FL 33314

Mailing Address:

6191 ORANGE DRIVE SUITE 6163G  
DAVIE, FL 33314

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:

FEIJOO FEIJOO, HECTOR E. .

Name

6191 ORANGE DRIVE SUITE 6163G

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

DAVIE

City

FL

State

33314

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..*

Hector E. Feijoo

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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DADE COUNTY, FLORIDA

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**ARTICLE IV-**

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

**Title:**

**Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

FEJOO FEJOO, HECTOR E.  
6191 ORANGE DRIVE SUITE 6163G  
DAVIE, FL 33314

AMBR

MARIDUENA MARIDUENA, LARIZZA R.  
6191 ORANGE DRIVE SUITE 6163G  
DAVIE, FL 33314

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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.

FEJOO FEJOO, HECTOR E.

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)

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