

# L24000170951

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000136904 3)))



H240001369043ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : 120000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

\*\*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.  
MJVC USA LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

FILED  
2024 APR 15 AM 8:21  
TALLAHASSEE, FLORIDA

FILED  
2024 APR 15 PM 4:33

Electronic Filing Menu

Corporate Filing Menu

Help

MS

## **ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

### **ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "LLC," or "LLC.")*

**MJVC USA LLC**

### **ARTICLE II - Address:**

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

2103 CORAL WAY  
Suite 800  
Miami, FL 33145

### **ARTICLE III - Registered Agent, Registered Office:**

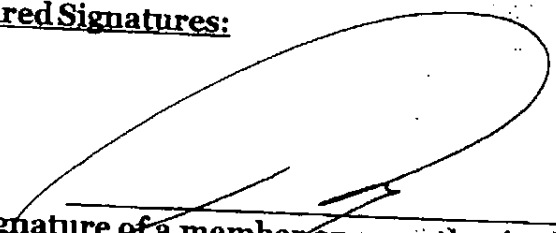
The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

ANDERSON CASTRO, P.A.  
2103 CORAL WAY  
Suite 800  
Miami, FL 33145

### **ARTICLE IV -**

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

Mario Jose Veloso Castiglione, Manager  
2103 CORAL WAY  
Suite 800  
Miami, FL 33145

**Required Signatures:**  
**Signature of a member or an authorized representative of a member.**

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

---

Mario Jose Veloso Castiglione

**Typed or printed name of signee**

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..

*Anderson Castro*

---

**Registered Agent's Signature (REQUIRED)**

FILED  
2024 APR 15 AM 8:21  
TALLAHASSEE, FLORIDA