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| Special Instructions to F | iling Officer | |
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Edwin C. Cisneros, Esq. ATTORNEY AT LAW Barbosa Legal 407 Lincoln Road, PH-NE Miami Beach, FL 33139 1: (305) 501-4680 F: (305) 359-9543 ecisneros@barbosalegal.com

May 10, 2024

Via USPS Priority Mail Tracking Number: 9405 5036 9930 0686 1871 48

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

> MELGAL LLC Re: Domestication

Dear Sir/Madam:

Please find enclosed for filing with your office the Articles of Domestication and Articles of Organization of MELGAL LLC. Also, enclosed is the Certificate of Good Standing regarding the company. Enclosed is a check for \$150.00 made pavable to the Florida Department of State for the filing fees for the Articles of Domestication and Articles of Organization.

Thank you for your curtesy and cooperation in this regard. Should you have any questions about the domestication, please call the undersigned at (305) 501-4680.

Thank you,

Edwin C. Cisneros, Esq.

Enclosures

COVER LETTER

| | Filing Section sion of Corporation | 15 | | | | |
|---------------------|---|--|--------------|---|--|--|
| | MELGAL LLC | | | | | |
| SUBJECT: | | Name of I | limited Liab | ility Company | | |
| Dear Sir or M | vladam: | | | | | |
| The enclosed | I Articles of Dome | stication of a Non-U.S. | Entity an | d fee(s) are submitted for filing. | | |
| | | e concerning this matte | | _ | | |
| Erika Kitaoka | ı da Silva | | | | | |
| | Na | me of Person | | - | | |
| Barbosa Lega | 1 | | | | | |
| | Fir | m/Company | | - | | |
| 407 Lincoln I | Rd PH-NE | | | | | |
| | | Address | | ~ | | |
| Miami Beach | , FL 33139 | | | | | |
| | City/S | tate and Zip Code | | - | | |
| renewals@ba | rbosalegal.com | | | | | |
| | | ed for future annual report n | otification) | | | |
| For further in | nformation concern | ing this matter, please | call: | | | |
| Edwin Cisner | ros | | 805 | 501-4680 | | |
| | Name of Person | at (| Area Code | Daytime Telephone Number | | |
| New Divi P.O. | ling Address: Filing Section Ision of Corporati Box 6327 ahassee, FL 3231 | | | Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303 | 810 10 10 10 10 10 10 10 10 10 10 10 10 1 | |
| | | Articles of Domestica Articles of Organizatio Total to Domesticate a | on: | \$25 \$125 \$150 | | |

ARTICLES OF DOMESTICATION

In accordance with 605.1055, Florida Statutes, the Articles of Domestication are submitted for filing:

- 1. The date on which the entity was first formed was: 7/16/1998
- 2. The name of the entity immediately prior to the filing of the Articles of Domestication was:

MELGAL CORP.

. . . .

- 3. Attached are Florida Articles of Organization to complete the domestication requirements pursuant to s. 605.0201.
- 4. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the entity or any other equivalent jurisdiction under applicable law, immediately before the filing of the Articles of Domestication was: British Virgin Islands
- 5. The domestication has been approved in accordance with the laws of the jurisdiction of formation of the domesticating entity.

I am authorized to sign these Articles of Domestication on behalf of the entity.

Authorized Signature

6. Attached is a certificate of status of equivalent document, if any, from the domesticating jurisdiction of formation, pursuant to s. 605.1055 (3), Florida Statutes.

CR2E143 (3/17)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MELGAL 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: | |
|---------------------------|------------------------|--|
| 407 Lincoln Road PH-NE | 407 Lincoln Road PH-NE | |
| Miami Beach, FL 33139 | Miami Beach, FL 33139 | |
| · · · · · · | | |

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:

| | Name |
|-----------------------|------------------------------------|
| 407 Lincoln Road PH- | NE |
| Florida street addres | s (P.O. Box <u>NOT</u> acceptable) |
| Miami Beach | FL 33139 |
| City | 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.,

Edwin Cisneros

Registered Agent's Signature (REQUIRED)

(CONTINUED)



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ARTICLE IV-

• • • •

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

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | |
|--|---|------------------------------|
| "MGR" = Manager MGR | Carlos Gallina Leone | |
| | 407 Lincoln Rd PH-NE | - |
| | Miami Beach, FL 33139 | - |
| MGR | Ana Mary Melero de Gallina | _ |
| | 407 Lincoln Rd PH-NE | _ |
| | Miami Beach, FL 33139 | - |
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| (Use attachment if necessary) | | |
| ARTICLE V: Effective date, if other than the c (If an effective date is listed, the date must be s days after the date of filing.) | late of filing: (OPITC specific and cannot be more than five business days | NAL) |
| ARTICLE VI: Other provisions, if any. | | |
| ······································ | | |
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| REQUIRED SIGNATURE: | nature of a member or an authorized representative | |
| | les, the execution of this document constitutes an affirmation un | |
| that the facts stated herein are true. I am aware that any | y false information submitted in a document to the Department (felony as provided for in s.817.155, F.S.) | of State constitutes a third |
| Carlos Gallina | | |
| | Typed or printed name of signec | |
| | Filing Fees: | |
| \$125.00 Filing Fee for Articles \$ 30.00 Certified Copy (Option | of Organization and Designation of Registered A nal) S 5.00 Certificate of Status (O | gent |
| | 5 5.00 Certificate of Status (O | prionary |