

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: This page is for informational use only. It is not a filing document. The filing number is shown below on the bottom of the page of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPAG REGISTERED AGENTS (USA), INC.

Account Number : 120220000185

Phone : (305)358-7872

Fax Number : (305)402-3898

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.

Real Inmobiliaria USA ELC

Certificate of Status	\$0
Certified Copy	\$0
Page Count	04
Estimated Charge	\$125.00

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TALLAHASSEE, FL2024 NOV 13 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Real Inmobiliaria 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:

For further: Roxana Diaz

Name of Person

Corpag Registered Agents (USA), Inc.

Firm/Company

800 Brickell Ave, Ste 800

Address

Miami, FL 33131

City/State and Zip Code

roxanadiaz@corpag.com

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

For further information concerning this matter, please call:

Roxana Diaz

305

358-7872

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Real Inmobiliaria 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:

2330 Ponce de Leon Blvd
Coral Gables, FL 33134 Miami, FL 33131

2330 Ponce de Leon Blvd
Coral Gables, FL 33134

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:

Corpag Registered Agents (USA), Inc.

Name

800 Brickell Ave, Ste 800

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

Miami Florida 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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Please do

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OFFICE, FL

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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

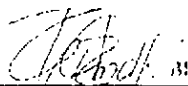
"MGR" = Manager

Name and Address:MGRJesus Eduardo Cordova de Souza
1073 Twin Branch LN
Weston, FL 33326, USAMGRRamon Augusto Remolina de la Piedra
La Floresta 255 MZ S LT 24 DPTO 102, URB Chacarilla
Santiago de Surco, Lima, Peru 0001601MGRSebastian Cuadros Marin
660 Washington ST APT 19H
Boston, Massachusetts, USAETC

(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.

Typed or printed name of signor**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)**