

5/14/25, 1:38 PM

From Ivis Diaz 1-888-527-7373 Tue Jun 3 11:28:38 2025 EDT
Division of Corporations

125000243696

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 : EXPRESS ACCOUNTING MANAGER
Account Number : 120210000189
Phone : (760)349-8865
Fax Number : (888)527-9343

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

Email Address: expressams314@gmail.com

FLORIDA LIMITED LIABILITY CO.
MOSHE 3000 USA LLC

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: MOSHE 3000 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:

FABIO DE SENZI MIGUEL

Name of Person

MOSHE 3000 USA LLC

Firm/Company

1645 PALM BEACH LAKES BLVD, FLOOR 12, SUITE 1200

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

expressams314@gmail.com

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

For further information concerning this matter, please call:

FABIO DE SENZI MIGUEL 760 349-8865

Name of Person

at ()
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
STATE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MOSHE 3000 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:

5609 ORANGE ORCHARD DR.
WINTER GARDEN, FL 34787

Mailing Address:

5609 ORANGE ORCHARD DR.
WINTER GARDEN, FL 34787

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:

RAINUS GROUP LLC

Name

1645 PALM BEACH LAKES, FLOOR 12, STE 1200

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


WEST PALM BEACH FLORIDA 33401

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)

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TALLAHASSEE, 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:

AMBR

FABIO DE SENZI MIGUEL
1645 PALM BEACH LAKES BLVD, FLOOR 12, STE 1201
WEST PALM BEACH, FL 33401

MGR

FABIO DE SENZI MIGUEL
1645 PALM BEACH LAKES BLVD, FLOOR 12, STE 1201
WEST PALM BEACH, FL 33401

AMBR

THADEU SALLES RODRIGUES
5609 ORANGE ORCHARD DR, WINTER GARDEN,
FL 34787

MGR

THADEU SALLES RODRIGUES
5609 ORANGE ORCHARD DR, WINTER GARDEN,
FL 34787

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: MAY 14, 2025. (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.

COMMERCIAL DISTRIBUTION AND ALL LEGAL SERVICES

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.

FABIO DE SENZI MIGUEL

Typed or printed name of signer

2025 JUN -3 PM 2:10
T. L. ...
FL

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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:

AMBR

JOSIEL VACISKI BARBOSA

5609 ORANGE ORCHARD DR, WINTER GARDEN,
FL 34787

AMBR

MARCOS ALBERTO CASADO PEREIRA

5609 ORANGE ORCHARD DR, WINTER GARDEN,
FL 34787

AMBR

ALEXANDRE LIMA LIRA

5609 ORANGE ORCHARD DR, WINTER GARDEN,
FL 34787

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: MAY 14, 2025 (OPTIONAL)

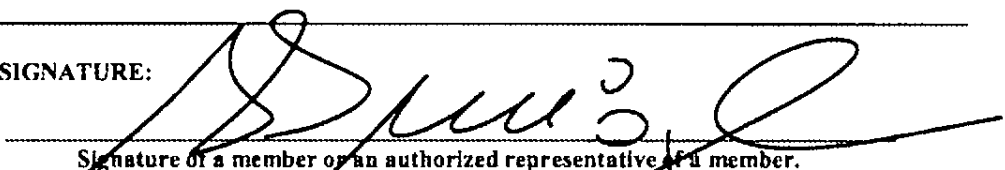
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