

L25000001409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

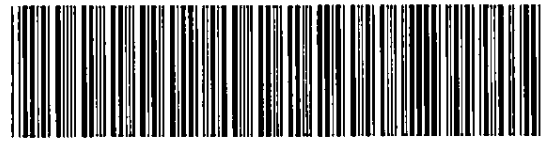
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2025 JUN -2 PM 3:47

2024 DEC 33 PM 8:29

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-54372  
(850) 524-6243

Please use funds from the account J20210000160: \$130.00

Authorization Signature *Jan Teller*

VIVA Engi Vest USA LLC

Business

#Document

Walk in

Will wait

     Certified Copies of the Articles of Organization  
X Certificate of Status

**NEW FILINGS**

     Profit  
     Not for Profit  
X LLC  
     Domestication  
     INC  
     CORP  
     OTHER

**AMENDMENTS**

     Amendment  
     Resignation of R.A.  
     Change of Registered Agent  
     Dissolution/Withdrawal  
     Conversion  
     Statement of Authority  
     Merger  
     Amended and Restated Articles

**OTHER FILINGS**

     Annual Report  
     Fictitious Name  
     Statement of Authority  
     APOSTIL               
                    COUNTRY

**REGISTRATION/QUALIFICATIONS**

     Foreign Filing  
     Partnership  
     Reinstatement  
     Statement of CORRECTION  
     Domestication of a Foreign Corp.  
     Other

EXAMINER'S INITIALS:             

2025 JUN -2 PM 9:47

FLORIDA CAPITAL COURIER SERVICES, INC  
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TALLAHASSEE, FL 32309  
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Please use funds from the account 120210000160: \$130.00

Authorization Signature

*[Signature]*

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EXAMINER'S INITIALS:                     

2025 JUN -2 PM 3:47

**COVER LETTER**

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

**SUBJECT:** VIVA EngiVest 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:

FLOR LOZANO DUGGER

\_\_\_\_\_  
Name of Person

2D CONSULTING ENTERPRISE LLC

\_\_\_\_\_  
Firm/Company

2750 TAYLOR AVE SUITE A-50 DOSO SUITES

\_\_\_\_\_  
Address

ORLANDO, FLORIDA 32806

\_\_\_\_\_  
City/State and Zip Code

2DCONSULTINGENTERPRISE@GMAIL.COM

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

For further information concerning this matter, please call:

FLOR LOZANO DUGGER

904

382-0889

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:

VIVA EngiVest 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:

6735 REVERIE PARK AVE  
ORLANDO FL. 32829

Mailing Address:

6735 REVERIE PARK AVE  
ORLANDO FL. 32829

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:

JAVIER E CONTRERAS CASTRO

Name

6735 REVERIE PARK AVE

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

ORLANDO

FLORIDA

32829

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..

*Javier E Contreras Castro*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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

OLGA L VIVAS  
6735 REVERIE PARK AVE  
ORLANDO, FLORIDA 32829

MBR

JAVIER E CONTRERAS CASTRO  
6735 REVERIE PARK AVE  
ORLANDO, FLORIDA 32829

(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. THE COMPANY IS ORGANIZED TO PROVIDE SERVICES IN CIVIL ENGINEERING (DESIGN Y CONSTRUCTION) MECHANIC AND ELECTRIC ENGENIERING;ALSO,PROYECT MANAGEMENT FINANCIAL ANALISYS OF INVESTMENT PROYECTS. RESEARCH AND DEVOLPMENT OF PROYECTS. AND CONSULTING SERVICES IN RELATED ACTIVITIES. ALSO, THE COMPANY WILL DO BUSINESS IN REAL PROPERTY INVESTMENT, RENTAL, MANAGEMENT PROPERTIES AND ALL ACTIVITIES RELATED TO THIS BUSINESS.

**REQUIRED SIGNATURE:**

*Javier E Contreras Castro*

**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.

JAVIER E CONTRERAS CASTRO

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)**