Florida Department of State

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Foreign Limited Liability Company JAMBER TECHNOLOGY LLC

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Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, PLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREKEN LIMITED LLABBLITY COMPANY TO TRANSACT IN NIVESY IN THE STATE OF FLORIDA: L JAMBER TECHNOLOGY LLC (Name of Fereign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI C.") JAMBER FL TECHNOLOGY LLC (If name tonswibble, enter obtains name adapted for the purpose of impracting furthers in Florida. The alternate come must include "Limited Lability Company," "L.L.C." or "LLC.") 2. DELAWARE 3. 82-2397993 (formalicates under the low of which foreign broated (tability enorgality is premitted) (IEI transce, il applicable) (Date first transacted leatness in Forbia, if prior to registration.)
(See sections 605,0904-2, 605,0905, F.S. to determine penalty liability) 5. 2600 S DOUGLAS ROAD 2600 S DOUGLAS ROAD (Signet Address of Principal Utilice) (Mading Address) SUITE 501 SUITE 501 CORAL GABLES FL 33134 CORAL GABLES FL 33134 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) AGENT TRUSTEE SERVICES LLC Name. 2600 S DOUGLAS ROAD, SUITE 501 Office Address: CORAL GABLES , Florida <u>33134</u> (CAV) Registered agent's acceptance: 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 application, 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 rela<u>tive to the</u> proper and complete performance of my duties, and I am familiar with and accept the chilgations of my position a registered agent. Pentric vicia (signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Name and Address: Title or Canacity: SEE ATTACHMENT SEE ATTACHMENT (Use attachments if accessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted) 10. This document is executed in cordance with section 685,0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of Maly constitutes a third degree felony as provided for in s.817.155, F.S. प्रदेशकात्रक (भी ५८ बाइडिस्क्ट्रेस्ट्रेट) person Otavio Chagas/Montenegro Duarte Typed as posted name of signer

JAMBER TECHNOLOGY LLC Attachment - Line 8

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	
AMBR	NetBR Distribuicao e Consultoria em Informatica Ltda.	
	Rua Alvaro Anes, 46-2nd Floor - Suite 24	
	05421-010 - Sao Paulo - Sao Paulo - Brazil	
MGR	Otavio Chagas Montenegro Duarte	
	Rua Alvaro Anes, 46-2nd Floor - Suite 24	
	05421-010 - Sao Paulo - Sao Paulo - Brazil	
MGR	Abdo Calil Neto	
	Rúa Alvaro Anes, 46-2nd Floor - Suite 24	
	05421-010 - Sao Paulo - Sao Paulo - Brazil	

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JAMBER TECHNOLOGY LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SECOND DAY OF AUGUST, A.D. 2017.

at corp.delaware.gov/aut

Authentication: 202993948

Date: 08-02-17

6489478 8300 SR# 20175375982

You may verify this certificate online at corp.delaware.gov/authver.shtml