

M19000001188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

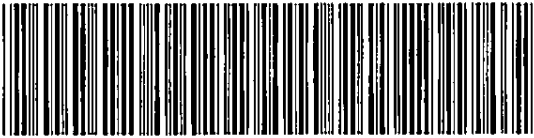
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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19 FEB -1 PM 12:15

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19 FEB -1 AM 7:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NanoSUR, LLC
CIC Miami
1951 NW 7th Avenue
Miami, FL 33136

Dear Sir/Madam,

I am hereby kindly requesting that you send a "Certificate of Status" for NANOSUR LLC to the following address:

Juan Arhancet
7135 Collins Ave.
Apt. 1012
Miami Beach, FL 33141

Enclosed, please find the following items:

1. A Certificate of Existence for NANOSUR LLC, issued by the State of Delaware
2. A signed document requesting:
 - a. The registration of NANOSUR LLC (a Delaware company) in the State of Florida, and
 - b. A "Certificate of Status" from the State of Florida for NANOSUR LLC.
3. A \$130 check to pay to the Florida Department of State for the services requested
4. A prepaid self-addressed envelope for you to mail me the "Certificate of Status"

Should you have any question, please feel free to call me.

Best regards, yours sincerely,

Juan

Juan Arhancet, Ph.D.
CEO, NanoSUR
(202)701-5532
nanosurja@gmail.com
www.nanosur.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NANOSUR

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Juan Arhancet

Name of Person

NANOSUR

Firm/Company

CIC Miami, Suite 600, 1951 NW 7th Avenue

Address

Miami, Florida, 33136

City/State and Zip Code

nanosurja@gmail.com

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

For further information concerning this matter, please call:

Juan Arhancet

Name of Contact Person

at (202) 701-5532

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NANOSUR LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware, USA (Jurisdiction under the law of which foreign limited liability company is organized) 3. 81-5179046 (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

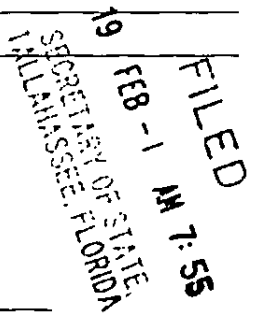
5. 1951 NW 7th Avenue (Street Address of Principal Office)
CIC Miami, Suite 600
Miami, FL 33136

6. 1951 NW 7th Avenue (Mailing Address)
CIC Miami, Suite 600
Miami, FL 33136

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Northwest Registered Agent, LLC.

Office Address: 7901 4th St N STE 300
St. Petersburg, Florida 33702
(City) (Zip code)



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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ton Glover
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Officer</u>	<u>Juan Arhancet</u> <small>7135 Collins Ave. Apt 1012 Miami Beach, FL 33141</small>	<u>Officer</u>	_____
<u>Officer</u>	<u>Grace Arhancet</u> <small>7135 Collins Ave. Apt 1012 Miami Beach, FL 33141</small>	<u>Officer</u>	_____

(Use attachments if necessary)

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 oath of the translator must be submitted)

10. 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.

Juan Arhancet
Signature of an authorized person

Juan Arhancet
Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NANOSUR 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 TWENTY-NINTH DAY OF JANUARY, A. D. 2019.




Jeffrey W. Bullock, Secretary of State

5034596 8300

SR# 20190551908

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

Authentication: 202159492

Date: 01-29-19