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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From

Account Name : SWART BAUMRUK & COMPANY, LLP
Account Number : 120000000291
Phone : (407) 847-7466
Fax Number : (407) 847-6641

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

Email Address: _____

2016 JUL 25 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

Acime Participacoes e Investimentos LTDA

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

2016 JUL 25 P 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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From: Dixie Kennedy Fax: (866) 695-0886

7/25/2016 9:26:22 AM PAGE 1/001
To: 8506176383@rcfax.com Fax: +18506176383 Page 1 of 8 07/25/2016 10:15 AM



July 25, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ANA LUISA LANTIGUA
1101 MIRANDA LANE
KISSIMME, FL 34741

SUBJECT: ACIME PARTICIPACOES E INVESTIMENTOS LTDA
REF: W16000051411

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II
Registration Section

FAX Aud. #: H16000176781
Letter Number: 216A00015456

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Acime Participacoes e Investimentos LTDA Corp

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ana Luisa Lantigua

Name of Person

Swart Baumruk & Company, LLP

Firm/Company

1101 Miranda Lane

Address

Kissimmee, FL 34741

City/State and Zip code

taxes@sbc-cpa.com

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

For further information concerning this matter, please call:

C. McDonah

at (407)

847-7466

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Acime Participacoes e Investimentos LTDA Corp
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Brazil 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 7/16/2005 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1364 Joao Cachoeira Vila Nova Conceigao, Sao Paulo 04535-006 Brazil
(Principal office address)
- 1101 Miranda Lane, Kissimmee, Florida 34741
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Swart Baumruk & Company, LLP
Office Address: 1101 Miranda Lane
Kissimmee, Florida 34741
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.


(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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 TALLAHASSEE, FLORIDA

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Marcelo Ricardo Ortiz
Address: 18 WALTON WAY - PORT MOODY - BC - CANADA
ZIP: V3H-3P3

Vice Chairman: EDGARD ALCIDES Ortiz
Address: 1061 APT 12A VERBO DIVINO - SP/SP - BRASIL
ZIP: 04.719-002

Director: ELISABETH CERSOSIMO Ortiz
Address: VERBO DIVINO 1061 - APT 12A - SP/SP - BRASIL
ZIP: 04.719-002

Director: _____
Address: _____

B. OFFICERS

President: _____
Address: _____

Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Marcelo Ricardo Ortiz, President
(Typed or printed name and capacity of person signing application)

(((H16000176781 3)))

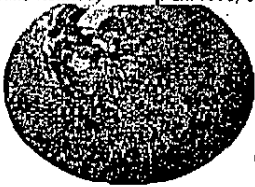
Comprovante de Inscrição e de Situação Cadastral**Contribuinte,**

Confira os dados de Identificação da Pessoa Jurídica e, se houver qualquer divergência, providencie junto à RFB a sua atualização cadastral.

		REPÚBLICA FEDERATIVA DO BRASIL	
CADASTRO NACIONAL DA PESSOA JURÍDICA			
NÚMERO DE INSCRIÇÃO 62.789.441/0001-71 MATRIZ	COMPROVANTE DE INSCRIÇÃO E DE SITUAÇÃO CADASTRAL		DATA DE ABERTURA 30/04/1970
NOME EMPRESARIAL ACIME PARTICIPAÇÕES E INVESTIMENTOS LTDA - EPP			
TÍTULO DO ESTABELECIMENTO (NOME DE FANTASIA) *****			
CÓDIGO E DESCRIÇÃO DA ATIVIDADE ECONÔMICA PRINCIPAL 41.10-7-00 - Incorporação de empreendimentos imobiliários			
CÓDIGO E DESCRIÇÃO DAS ATIVIDADES ECONÔMICAS SECUNDÁRIAS Não Informada			
CÓDIGO E DESCRIÇÃO DA NATUREZA JURÍDICA 206-2 - SOCIEDADE EMPRESARIA LIMITADA			
LOGRADOURO R JOAO CACHOEIRA	NÚMERO 1364	COMPLEMENTO	
CEP 04.535-006	BAIRRO/DISTRITO VILA NOVA CONCEICAO	MUNICÍPIO SAO PAULO	UF SP
ENDEREÇO ELETRÔNICO		TELEFONE	
ENTE FEDERATIVO RESPONSÁVEL (EFR) *****			
SITUAÇÃO CADASTRAL ATIVA		DATA DA SITUAÇÃO CADASTRAL 15/07/2005	
MOTIVO DE SITUAÇÃO CADASTRAL			
SITUAÇÃO ESPECIAL *****		DATA DA SITUAÇÃO ESPECIAL *****	

Aprovado pela Instrução Normativa RFB nº 1.470, de 30 de maio de 2014.

Emitido no dia **15/07/2016** às **13:18:20** (data e hora de Brasília). Página: 1/1


CLI

Creole Language Interpreters, LLC

Phone: 407.442.0327

www.creolclanguage.net

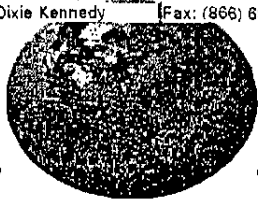
4700 Millenia Blvd., Suite 175

Orlando, Florida 32839

Proof of Enrollment and Registration Status
Taxpayer,

Check the identification data of Legal Entity, and if there is any divergence, provide at the RFB your registration update.

FEDERAL REPUBLIC OF BRAZIL			
NATIONAL REGISTER OF LEGAL ENTITIES			
REGISTRATION NO. 62.789.441/0001-71 Main Registry	REGISTRATION RECEIPT AND REGISTRATION STATUS		OPENING DATE 04/30/7
BUSINESS NAME ACIME PARTICIPACOES E INVESTIMENTOS LTDA - EPP			
TITLE OF ESTABLISHMENT (TRADE NAME) *****			
CODE AND DESCRIPTION OF THE MAIN BUSINESS ACTIVITY 41.10-7-00 - Development of Real estate ventures			
CODE AND DESCRIPTION OF SECONDARY ECONOMIC ACTIVITIES No Information			
CODE AND DESCRIPTION OF LEGAL STATUS 206-2 - LIMITED LIABILITY COMPANY			
STREET ADDRESS R JOAO CACHOEIRA			
ZIP CODE 04.535-006	NEIGHBORHOOD / DISTRICT VILA NOVA CONCEICAO		
E-MAIL ADDRESS	NUMBER 1364	OTHER	
	MUNICIPALITY SAO PAULO	STATE SP	
PHONE			
RESPONSIBLE FEDERAL ENTITY (EFR) *****			
REGISTRATION STATUS ACTIVE		DATE OF REGISTRATION 07/16/2005	
REASON FOR REGISTRATION STATUS			
SPECIAL STATUS *****		DATE OF THE SPECIAL STATUS *****	



CLI

Creole Language Interpreters, LLC
"Connecting Through Language"

Phone: 407.442.0327

www.creolclanguage.net

4700 Millenia Blvd., Suite 175

Orlando, Florida 32839

Certification of Translation Accuracy

1) Translation of Written Document Translated from Portuguese to English.

a. Business Registration (Federative Republic of Brazil, National Register of Legal Entity)

We, Creole Language Interpreters LLC, a professional translation company, hereby certify that the above-mentioned written document has been translated by experienced and qualified professional translators and that, in our best judgment, the translated documents truly reflect the content, meaning and style of the original written document and constitute, in every respect, a correct and true translation of the original written document. A copy of the translated written document is attached to this certification. The translated document and the certification consists of 2 pages.

Signature

Name: Adonis Labady
Title: Project Manager

Translation Company
Creole Language Interpreters, LLC.
4700 Millenia Blvd., Suite 175
Orlando, FL 32839



Date: July 18, 2016

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