

F190000004149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

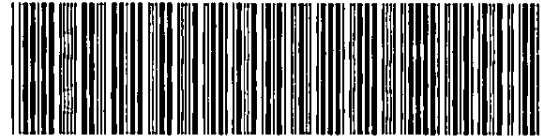
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

19000004149

Office Use Only



300332891713

08/21/19--01017--003 **87.50

APPROVED
AND
FILED
2019 SEP - 9 PM 4:32

RECEIVED

SEP - 9 2019

T GLASS

SEP 10 2019

COVER LETTER

TO: Registration Section
Division of Corporations
Safrapay Inc.

SUBJECT: _____
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:
Carlos Bertaco

_____	Name of Person
Safrapay Inc.	
_____	Firm/Company
546 5th Avenue, 2nd Floor	
_____	Address
New York, NY 10036	
_____	City/State and Zip code
carlos.bertaco@safra.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Bertaco	212	704-5596
_____	at (_____)	_____
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:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|--|---|--|

2019 SEP -9 PM 4:32

APPROVED
AND
FILED

**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.*

Safrapay Inc.

1. _____
(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)
Delaware 83-3616003

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
February 15, 2019

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
February 15, 2019

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
3050 Aventura Blvd., Aventura, FL 33180

7. _____
(Principal office address)

(Current mailing address, if different)


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

Name: Alexandre Farkuh
3050 Aventura Blvd.

Office Address: _____
Aventura 33180
_____, Florida _____
(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.

 8/13/19

(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.

2019 SEP -9 PM 4:32
FILED
NOTED

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

A. DIRECTORS

Helio Sarfaty

Chairman: 3050 Aventura Blvd.

Address: Aventura, FL 33180

Vice Chairman:

Address:

Director: Carlos Bertaco
546 5th Avenue, 2nd Floor

Address: New York, NY 10036

Director: Simoni Morato
546 5th Avenue, 2nd Floor

Address: New York, NY 10036

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.  8/13/19

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. ~~Director~~ CARLOS BERTACO, DIRECTOR

(Typed or printed name and capacity of person signing application)

APPROVED
AND
FILED
2019 SEP -9 PM 4:32

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SAFRAPAY INC." IS DULY INCORPORATED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND
HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE SECOND DAY OF AUGUST, A.D. 2019.

2019 SEP -9 PM 4:32


RECEIVED
AND
FILED



7283273 8300

SR# 20196302009

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203341366

Date: 08-02-19