

F 22000006315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2022 04-27 PM 4:21

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FAS - PARTICIPACAO E EMPREENDIMENTOS LTDA *Company*

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:

Paulo Factor

	Name of Person	0220
Safety Tax & Bookkeeping		
	Firm/Company	-7
4307 Vineland Rd, Suite H-7		
	Address	F.O.B.
Orlando, FL 32811		
	City/State and Zip code	
factor@safetytax.com		
	E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Paulo Factor	at (407)	888 4747
Name of Person	Area Code	Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$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. FAS - PARTICIPACAO E EMPREENDIMENTO LTDA COMPANY  
(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. 981648066  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/11/2005 5. PERPETUAL  
(Date of incorporation) (Date of duration, if other than perpetual)
6. 01/01/2022  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 9464 PRINCE HARRY DRIVE, ORLANDO, FL 32836  
(Principal office street address)
- 4307 VINELAND RD, SUITE H7, ORLANDO, FL 32811  
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: NETWORK FOR PRO LLC
- Office Address: 4307 VINELAND RD, SUITE SUITE H-7  
ORLANDO, Florida 32811  
(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☒ Chairman Name: FFLAVIA FRONTEROTA SACCHI  
☐ Vice Chairman Address: 9464 PRINCE HARRY DRIVE, C  
☐ Director Orlando, FL 32836  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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



# AFFIDAVIT OF TRANSLATION ACCURACY

## CERTIFICATE OF TRANSLATION

We, GB TRANSLATIONS AND COACHING INC., a professional translation company, hereby certify that the professional translation from **Portuguese** to **English** language has been translated by a qualified translator fluent in both languages, and that the following translation is a complete and accurate translation of the document attached.

**"CNPJ"**

We do not guarantee that the original is a genuine document, or that the statements contained in the original document are true. Further, GB Translations and Coaching Inc. assumes no liability for the way in which the translation is used by the customer or any third party, including end users of the translation.

A copy of the translation is attached to this certification and the original documents.

I, **Gabriela Bosque**, am competent to translate from **Portuguese** into **English**, and certify that the translation is complete and accurate to the best of my abilities.

Certified and Translated by:

*Gabriela Bosque*

Gabriela Bosque

Date: Friday, March 25, 2022



**ATA MEMBER**  
American Translators Association



**NAJIT**

Empowering Interpreters & Translators Worldwide™

**SINTRA**



ASSOCIATION OF TRANSLATORS  
AND INTERPRETERS OF FLORIDA

2022 MAR - 7 PM 4:01



03/23/2022 15:42



FEDERAL REPUBLIC OF BRAZIL  
NATIONAL REGISTRATION OF LEGAL ENTITIES

REGISTRATION NUMBER 03.665.407/0001-26 HEADQUARTERS	PROOF OF REGISTRATION AND DATA STATUS	OPENING DATE 02/17/2000
---	---------------------------------------	----------------------------

CORPORATE NAME FAS - PARTICIPACAO E EMPREENDIMENTOS LTDA
---

TITLE OF THE ESTABLISHMENT (TRADE NAME) *****	PORT EPP
--	-------------

CODE AND DESCRIPTION OF THE MAIN ECONOMIC ACTIVITY 82.99-7-99 - Other activities of service provided primarily to companies not previously specified
---

CODE AND DESCRIPTION OF SECONDARY ECONOMIC ACTIVITIES 63.99-2-00 - Other activities of service provision not previously specified 74.10-2-99 - design activities not previously specified 74.90-1-05 - Representation of professionals for sports, cultural, and artistic activities 74.90-1-99 - Other professional, scientific, and technical activities not previously specified 82.19-9-99 - Preparation of documents and specialized administrative support services not previously specified 82.99-7-03 - Stamp engraving services, except manufacturing 82.99-7-07 - Internet access rooms
--

CODE AND DESCRIPTION OF LEGAL STATUS 206-2 - Limited Liability Company
---

ADDRESS AV NOVA CANTAREIRA	NUMBER 2087	COMPLEMENT ANDAR 8 SALA 82
-------------------------------	----------------	-------------------------------

ZIP 02.331-003	NEIGHBORHOOD TUCURUVI	CITY SAO PAULO	STATE SP
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EMAIL ADDRESS CONTATO@INTERATIVAASSESSORIA.COM.BR	PHONE (11) 2738-6101
--	-------------------------

RESPONSIBLE FEDERATIVE ENFORCEMENT ENTITY(EFR) *****
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DATA STATUS ACTIVE	DATE OF DATA STATUS 11/03/2005
-----------------------	-----------------------------------

REASON OF REGISTRATION STATUS
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SPECIAL STATUS *****	DATE OF SPECIAL STATUS *****
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Approved by Normative Instruction RFB number 1,863, of December 27<sup>th</sup>, 2018.

Issued on 03/23/2022 at 16:42:02 (date and time in Brasilia).



**REPÚBLICA FEDERATIVA DO BRASIL**  
**CADASTRO NACIONAL DA PESSOA JURÍDICA**

NÚMERO DE INSCRIÇÃO <b>03.665.407/0001-26</b> MATRIZ	<b>COMPROVANTE DE INSCRIÇÃO E DE SITUAÇÃO CADASTRAL</b>	DATA DE ABERTURA <b>17/02/2000</b>
NOME EMPRESARIAL <b>FAS - PARTICIPACAO E EMPREENDIMENTOS LTDA</b>		
TÍTULO DO ESTABELECIMENTO (NOME DE FANTASIA) *****		PORTE <b>EPP</b>
CÓDIGO E DESCRIÇÃO DA ATIVIDADE ECONÔMICA PRINCIPAL <b>82.99-7-99 - Outras atividades de serviços prestados principalmente às empresas não especificadas anteriormente</b>		
CÓDIGO E DESCRIÇÃO DAS ATIVIDADES ECONÔMICAS SECUNDÁRIAS <b>63.99-2-00 - Outras atividades de prestação de serviços de informação não especificadas anteriormente</b> <b>74.10-2-99 - atividades de design não especificadas anteriormente</b> <b>74.90-1-05 - Agenciamento de profissionais para atividades esportivas, culturais e artísticas</b> <b>74.90-1-99 - Outras atividades profissionais, científicas e técnicas não especificadas anteriormente</b> <b>82.19-9-99 - Preparação de documentos e serviços especializados de apoio administrativo não especificados anteriormente</b> <b>82.99-7-03 - Serviços de gravação de carimbos, exceto confecção</b> <b>82.99-7-07 - Salas de acesso à internet</b>		
CÓDIGO E DESCRIÇÃO DA NATUREZA JURÍDICA <b>206-2 - Sociedade Empresária Limitada</b>		
LOGRADOURO <b>AV NOVA CANTAREIRA</b>	NÚMERO <b>2087</b>	COMPLEMENTO <b>ANDAR 8 SALA 82</b>
CEP <b>02.331-003</b>	BAIRRO/DISTRITO <b>TUCURUVI</b>	MUNICÍPIO <b>SAO PAULO</b>
ENDEREÇO ELETRÔNICO <b>CONTATO@INTERATIVAASSESSORIA.COM.BR</b>		TELEFONE <b>(11) 2738-6101</b>
ENTE FEDERATIVO RESPONSÁVEL (EFR) *****		
SITUAÇÃO CADASTRAL <b>ATIVA</b>		DATA DA SITUAÇÃO CADASTRAL <b>03/11/2005</b>
MOTIVO DE SITUAÇÃO CADASTRAL  		
SITUAÇÃO ESPECIAL *****		DATA DA SITUAÇÃO ESPECIAL *****

2022-03-23 15:42:21

Aprovado pela Instrução Normativa RFB nº 1.863, de 27 de dezembro de 2018.

Emitido no dia 23/03/2022 às 16:42:02 (data e hora de Brasília).

Página: 1/1



# AFFIDAVIT OF TRANSLATION ACCURACY

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### **"Joint Certificate of Real Estate Tax Debts"**

We do not guarantee that the original is a genuine document, or that the statements contained in the original document are true. Further, GB Translations and Coaching Inc. assumes no liability for the way in which the translation is used by the customer or any third party, including end users of the translation.

A copy of the translation is attached to this certification and the original documents.

I, **Gabriela Bosque**, am competent to translate from **Portuguese** into **English**, and certify that the translation is complete and accurate to the best of my abilities.

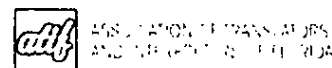
2022-03-25 PM 4:21

Certified and Translated by:

*Gabriela Bosque*

Gabriela Bosque

Date: Friday, March 25, 2022







**CITY HALL OF  
SÃO PAULO  
TREASURY  
MUNICIPAL TREASURY DEPARTMENT**

**Joint Certificate of Security Tax Clearance**

**Certificate Number:** 0275210 - 2022

**CPF/CNPJ:** 03.665.407/  
**Taxpayer:** FAS PARTICIPACAO E EMPREENDIMENTOS LTDA

**Clearance:** 03/23/2022  
**Valid Through:** 09/19/2022

**Fees Covered:** Tax on Services - ISS  
Location, Installation, and Operation Inspection Fee  
Advertising Inspection Fee - TFA  
Establishment Inspection Fee - TFE  
Health Services Solid Waste Fee - TRSS (incidence from Jan/2011)  
Real Property Transfer Tax - ITBI

**Tax Unit:**

CCM 6.460.796-8- Activity start: 05/10/2012 (AV NOVA CANTAREIRA, 2087 - ZIP: 02331-003)

Without prejudice to the right of the Municipal Treasury Department to collect and register any debts under the responsibility of the taxable individual that may be determined or that occur at any time, including in relation to the period contained in this document, regarding taxes administered by the Municipal Treasury Department and the registrations in Municipal Outstanding Debt, with the Attorney General's Office of the City, it is attested that the Tax Status of the aforementioned Taxpayer, referring to the tax credits registered and not registered in the Outstanding Debt covered by this certificate, up to the present date, is: **IN GOOD STANDING**.

The acceptance of this certificate is subject to the verification of its authenticity on the Internet, at <http://www.prefeitura.sp.gov.br/cidade/secretarias/fazenda/>.  
Any erasure will invalidate this document.

Certificate issued based on Joint Ordinance SF/PGM number 4, of April 12<sup>th</sup>, 2017, Normative Instruction SF/SUREM number 3, of April 6<sup>th</sup>, 2015, Decree 50.691, of June 29<sup>th</sup>, 2009, Decree 51.714, of August 13<sup>th</sup>, 2010; Ordinance SF number 268, of October 11<sup>th</sup>, 2019 and Ordinance SF number 182, of August 4<sup>th</sup>, 2021.

Certificate issued at 09:43:26 hours on 03/23/2022 (Brasília time and date).

**Authenticity Code:** BE4B151

The authenticity of this certificate must be confirmed on the page of the Municipal Treasury Department <http://www.prefeitura.sp.gov.br/sf>



**PREFEITURA DE  
SÃO PAULO**

**FAZENDA**

**SECRETARIA MUNICIPAL DA FAZENDA**

**Certidão Conjunta de Débitos de Tributos Mobiliários**

**Certidão Número:** 0275210 - 2022

**CPF/CNPJ Raiz:** 03.665.407/

**Contribuinte:** FAS PARTICIPACAO E EMPREENDIMENTOS LTDA

**Liberação:** 23/03/2022

**Validade:** 19/09/2022

**Tributos Abrangidos:** Imposto Sobre Serviços - ISS  
Taxa de Fiscalização de Localização Instalação e Funcionamento  
Taxa de Fiscalização de Anúncio - TFA  
Taxa de Fiscalização de Estabelecimento - TFE  
Taxa de Resíduos Sólidos de Serviços de Saúde - TRSS (Incidência a partir de Jan/2011)  
Imposto Sobre Transmissão de Bens Imóveis - ITBI

**Unidades Tributárias:**

CCM 6.460.796-8- Início atv :10/05/2012 (AV NOVA CANTAREIRA, 2087 - CEP: 02331-003 )

Ressalvado o direito de a Fazenda Municipal cobrar e inscrever quaisquer dívidas de responsabilidade do sujeito passivo que vierem a ser apuradas ou que se verifiquem a qualquer tempo, inclusive em relação ao período contido neste documento, relativas a tributos administrados pela Secretaria Municipal da Fazenda e a inscrições em Dívida Ativa Municipal, junto à Procuradoria Geral do Município é certificado que a Situação Fiscal do Contribuinte supra, referente aos créditos tributários inscritos e não inscritos na Dívida Ativa abrangidos por esta certidão, até a presente data é: **REGULAR.**

A aceitação desta certidão está condicionada à verificação de sua autenticidade na Internet, no endereço <http://www.prefeitura.sp.gov.br/cidade/secretarias/fazenda/>.  
Qualquer rasura invalidará este documento.

Certidão expedida com base na Portaria Conjunta SF/PGM nº 4, de 12 de abril de 2017, Instrução Normativa SF/SUREM nº 3, de 6 de abril de 2015, Decreto 50.691, de 29 de junho de 2009, Decreto 51.714, de 13 de agosto de 2010; Portaria SF nº 268, de 11 de outubro de 2019 e Portaria SF nº 182, de 04 de agosto de 2021.

Certidão emitida às 09:43:26 horas do dia 23/03/2022 (hora e data de Brasília).

**Código de Autenticidade:** BE4B151

A autenticidade desta certidão deverá ser confirmada na página da Secretaria Municipal da Fazenda <http://www.prefeitura.sp.gov.br/sf>



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 9, 2022

PAULO FACTOR  
4307 VINELAND RD STE H-7  
ORLANDO, FL 32811 US

SUBJECT: FAS - PARTICIPACAO E EMPREENDIMENTOS LTDA  
Ref. Number: W22000060408

We have received your document for FAS - PARTICIPACAO E EMPREENDIMENTOS LTDA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Sharon D Franklin  
Regulatory Specialist II

Letter Number: 122A00010828

RECEIVED

OCT 07 2022