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(Requestor's Name)	
(Address)	300041694773
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	10/20/0401089009 **160.00
(Business Entity Name)	~~ .
(Document Number) Certified CopiesCertificates of Status	04 OCT 20 PM 1: 00 SE TAULABALLEL FLAGDA TAULABALLEL FLAGDA
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Office Use Only	

TRANSMITTAL LETTER

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

TO:

Registration Section
Division of Corporations

liability company to transact business in Florida..

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

Please return all correspondence concerning this matter to the following:

S. Dougla (Name	Sheldon of Person)
BIRAZIL Cigais	+ Tobocco, LLC
(rimy	Lompany)
4370 SW 70	OTH Avenue
(Ad	idress)
MiAmi, FL. (City/State)	3 3 (5 5 and Zip Code)
For further information concerning this matter, please	call:
S. Douglas Shelson (Name of Person)	at (786) 271-4405 (Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

☐ \$130.00 Filing Fee &

Certificate of Status

□ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate atus Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. BRAZIL Cigare + Tobacco LLC (Name of Foreign Limited Liability Company)
2. De a vare (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 29 July 2004 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. No TRAM ACTIONS (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4370 SW 70th Ave 55
MIAMI, FL. 33155 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
S. Douglas Sheldon
3610 OAKSWAY # 706
Pompaho Beach, FL. 33069
10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
IMPORT OF Signis
Signature of a metaber or an authorized representative of a member. In accordance with section 608/408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
S. Douglas SHELDON. Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

DRAZIL Cigars & lobacco LLC	
2. The name and the Florida street address of the registered agent and office are:	
S. Douglas Sheldon	
4370 SW 74 AUE Florida Street Address (P.O. Box NOT ACCEPTABLE)	¥1. 111. F-1
MIAMI FL 33155 City/State/Zip	

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRAZIL CIGARS & TOBACCO 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-FOURTH DAY OF SEPTEMBER, A.D. 2004.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

3836063 8300 AUTHENTICATION: 3372767

040693495 DATE: 09-24-04