

M12000002888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

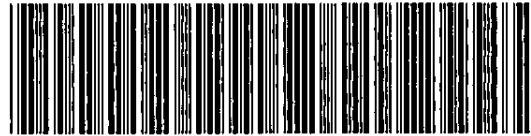
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/11/12--01027--023 **135.00

FILED
2012 MAY 22 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAY 23 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2012

ANTONIO COELHO MONTEIRO
2424 RAVENDALE COURT
KISSIMMEE, FL 34758

SUBJECT: VISAT COSMETICS, LLC
Ref. Number: W12000026585

We have received your document for VISAT COSMETICS, LLC and your check(s) totaling \$135.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

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.

Tammi Cline
Regulatory Specialist II

Letter Number: 812A00014224

2012 MAY 22 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VISAT COSMETICS, LLC
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:

ANTONIO COELHO MONTEIRO
Name of Person

VISAT COSMETICS, LLC
Firm/Company

2424 RAVENDALE COURT
Address

KISSIMMEE, FL 34758
City/State and Zip Code

Acmonteiro48@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO MONTEIRO at (321) 948-2004
Name of Person 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

2012 MAY 22 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. VISIT COSMETICS, LLC

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

VISAT HAIR, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. BRASIL

(Jurisdiction under the law of which foreign limited liability company is organized)

3. APPLIED FOR

(FEI number, if applicable)

4. 05/01/2012

(Date of Organization)

5. PERPETUAL

(Duration: Year limited liability company will cease to exist or "perpetual")

6. 05/01/2012

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7.

2424 RAVENDALE COURT, KISSIMMEE, FLORIDA 34758

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

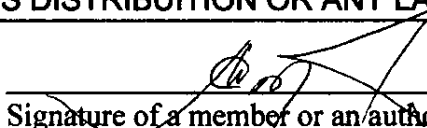
9. The name and usual business addresses of the managing members or managers are as follows:

CLAUDEMIR VITOR DOS SANTOS, PRESIDENT, 2424 RAVENDALE COURT, KISSIMMEE, FL 34758

ODAIR VITOR DOS SANTOS, VP, 2424 RAVENDALE CT, KISSIMMEE, FL 34758

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: **WHOSALE AND RE-
TAIL COSMETICS DISTRIBUTION OR ANY LAWFULL BUSINESS ALLOWD IN FLORIDA.**


Signature of a member 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. 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.)

ANTONIO C. MONTEIRO

Typed or printed name of signee

FILED
2012 MAY 22 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

VISAT COSMETICS, LLC

If unavailable, the alternate to be used in the state of Florida is:

VISAT HAIR, LLC

2. The name and the Florida street address of the registered agent and office are:

ANTONIO C. MONTEIRO

(Name)

2424 RAVENDALE COURT

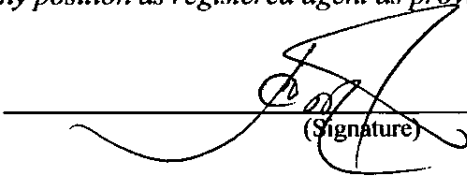
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

KISSIMMEE

FL 34758

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.


(Signature)

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

FILED
2012 MAY 22 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GOVERNMENT OF THE STATE OF SÃO PAULO
SECRETARY OF ECONOMIC DEVELOPMENT, SCIENCE AND TECHNOLOGY
COMERCIAL COUNCIL OF THE STATE OF SÃO PAULO

SIMPLIFIED CERTIFICATE

**WE CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUTHFUL AND ARCHIVED
IN THIS AGENCY AT THE DATE OF DISPATCH.**

IF THERE ARE SUBSEQUENT ARCHIVES, THIS CERTIFICATE WILL LOSE ITS VALIDITY.

**THE AUTHENTICITY OF THIS CERTIFICATE AND THE EXISTENCE OF SUBSEQUENT ARCHIVES, IF ANY,
MAY BE FOUND AT**

**SITE WWW.JUCESP.FARM.SP.GOV.BR, UPON THE AUTHENTICITY CODE INFORMED AT THE END OF THE
DOCUMENT.**

N: REGISTRATION 35222700725 of 12/17/08 «DÁTA LAURA 12/15/08 ACTIVITIES

TRADE AND LOCAL NAMES: COSMETIC VISAT LTDA

LEGAL TYPE: LIMITED LIABILITY PARTNERSHIP

C.N.P.J.: 1 0.624.6 1 4/06-0001

Address: RUA CAFELOS GOMES number: 974 ADD-ON: BOX 02-Subdivision:

**PONTA DE SÃO JOÃO MUNICIPALITY:-SP-CEP JUNDAI-UF: 13218-005-currency: REAL – CAPITAL: US \$
16,000.00**

COMERCIO COSMETIC WHOLESALER AND FRAGRANCE PRODUCTS

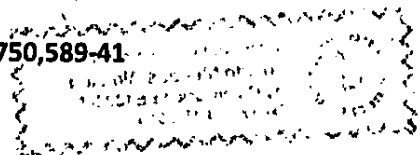
MANAGER/PARTNER

NAME: CLAUDEMIR VITOR DOS SANTOS

Address: RUA CAPITAO ASSIS, NUMBER 607, ADD-ON: funds, district: CENTRO,

MUNICIPIO DE ASSIS-UF of S.P., CEP 19800-060, 79881260 RG, CPF 023,750,589-41

Position: ADMINISTRATOR-CAPITAL SUBSCRIBED: US\$16000.00





GOVERNO DO ESTADO DE SÃO PAULO
SECRETARIA DE DESENVOLVIMENTO ECONÔMICO, CIÊNCIA E TECNOLOGIA
JUNTA COMERCIAL DO ESTADO DE SÃO PAULO

CERTIDÃO SIMPLIFICADA

CERTIFICAMOS QUE AS INFORMAÇÕES ABAIXO CONSTAM DOS DOCUMENTOS ARQUIVADOS NESTA JUNTA COMERCIAL E SÃO VIGENTES NA DATA DE SUA EXPEDIÇÃO.

SE HOUVER ARQUIVAMENTOS POSTERIORES, ESTA CERTIDÃO PERDERÁ SUA VALIDADE.

A AUTENTICIDADE DESTA CERTIDÃO E A EXISTÊNCIA DE ARQUIVAMENTOS POSTERIORES, SE HOUVER, PODERÃO SER CONSULTADAS NO SITE WWW.JUCESP.FAZENDA.SP.GOV.BR, MEDIANTE O CÓDIGO DE AUTENTICIDADE INFORMADO AO FINAL DO DOCUMENTO.

EMPRESA							
NIRE	REGISTRO	DATA DA CONSTITUIÇÃO	INÍCIO DAS ATIVIDADES	PRAZO DE DURAÇÃO			
35222700725		17/12/2008	15/12/2008				
NOME COMERCIAL						TIPO JURÍDICO	
VISAT COSMETICOS LTDA						SOCIEDADE LIMITADA (M.E.)	
C.N.P.J.	ENDEREÇO	NÚMERO		COMPLEMENTO			
10.624.614/0001-06	RUA CARLOS GOMES	974		BOX 02			
BAIRRO	MUNICÍPIO	UF	CEP	MOEDA	VALOR CAPITAL		
PONTE DE SAO JOAO	JUNDIAI	SP	13218-005	R\$	30.000,00		

OBJETO SOCIAL
COMÉRCIO ATACADISTA DE COSMÉTICOS E PRODUTOS DE PERFUMARIA

SÓCIO E ADMINISTRADOR							
NOME							
CLAUDEMIR VITOR DOS SANTOS							
ENDEREÇO	NÚMERO		COMPLEMENTO				
RUA CAPITAO ASSIS	607		FUNDOS				
BAIRRO	MUNICÍPIO	UF	CEP	RG			
CENTRO	ASSIS	SP	19800-060	79881260			
CPF	CARGO	QUANTIDADE COTAS					
023.750.589-41	SÓCIO E ADMINISTRADOR	29.850,00					

SÓCIO							
NOME							
ODAIR VITOR DOS SANTOS							
ENDEREÇO	NÚMERO		COMPLEMENTO				
RUA JERIBATIBA	150						
BAIRRO	MUNICÍPIO	UF	CEP	RG			
VILA RIBEIRO	ASSIS	SP	19802-340	73856906			
CPF	CARGO	QUANTIDADE COTAS					
022.827.089-89	SÓCIO	150,00					

FILIAIS							
NIRE	CNPJ						
35903685999							
ENDEREÇO	NÚMERO		COMPLEMENTO				
RUA DO RETIRO	177		SALAS83/84				
BAIRRO	MUNICÍPIO	UF	CEP				



GOVERNO DO ESTADO DE SÃO PAULO
SECRETARIA DE DESENVOLVIMENTO ECONÔMICO, CIÊNCIA E TECNOLOGIA
JUNTA COMERCIAL DO ESTADO DE SÃO PAULO

CERTIDÃO SIMPLIFICADA

RETIRO	JUNDIAI	SP	13201-030
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ÚLTIMO DOCUMENTO ARQUIVADO

DATA
03/02/2012

NÚMERO
017.755/12-8

ALTERAÇÃO DA ATIVIDADE ECONÔMICA / OBJETO SOCIAL DA SEDE PARA COMÉRCIO ATACADISTA DE COSMÉTICOS E PRODUTOS DE PERFUMARIA.

ENDEREÇO DA SEDE ALTERADO PARA RUA CARLOS GOMES, 974, BOX 02, PONTE DE SÃO JOÃO, JUNDIAI - SP, CEP 13218-005.

ENDEREÇO DA FILIAL NIRE 35903685999, SITUADA À RUA CAPITÃO ASSIS, 607, CENTRO, ASSIS - SP, CEP 19800-060. ALTERADO PARA RUA DO RETIRO, 177, SALAS 83/84, RETIRO, JUNDIAI - SP, CEP 13201-030.

CONSOLIDAÇÃO CONTRATUAL DA MATRIZ, SITUADA À RUA CARLOS GOMES, 974, BOX 02, PONTE DE SÃO JOÃO, JUNDIAI - SP, CEP 13218-005.

FIM DAS INFORMAÇÕES PARA NIRE: 35222700725
DATA DA ÚLTIMA ATUALIZAÇÃO DA BASE DE DADOS: 07/02/2012



Certidão Simplificada emitida para LUCAS DE ALMEIDA CHADI: 30775673854
[Autenticidade: 19850202] - Junta Comercial do Estado de São Paulo - www.jucesp.fazenda.sp.gov.br

Assinatura do autor por Katia Regina Bueno de Godoy
autenticajucesp@fazenda.sp.gov.br, Validade desconhecida
Assinado por: Katia Regina Bueno de Godoy
Data: 08/02/2012 17:24:48 -02:00
Motivo: Autenticação de Certidão Simplificada
Localização: São Paulo

