M15000008845

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to CEO. W.F.	Filling Officer:	
	Office Use Only	

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SECRETARY OF STATE
-LLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2015

BRUNO DRUMMOND 80 SW 8TH STREET, SUITE 2000 MIAMI, FL 33130

SUBJECT: INDUSTRIA ALIMENTICIA DO VALE LTDA LLC

Ref. Number: W15000072158

We have received your document for INDUSTRIA ALIMENTICIA DO VALE LTDA LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return 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.

Stacey M Mason Regulatory Specialist II

Letter Number: 915A00023124

COVER LETTER

TO:

ТО: ."	Registration Section Division of Corporation	s							
		ENTICIA DO VALE LTDA	٠.						
SUBJE	ECT:	Name of t	imited Liability C	Company					
The en	closed "Application by For- ace, and check are submitted	eign Limited Liability Comp I to register the above refere	any for Authoriza need foreign limit	tion to Tra ed liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida			
Please	return all correspondence c	oncerning this matter to the	following:						
	BRUNO DRUM	MOND							
		Na	ime of Person						
	DRUMMOND	CONSULTING LLC							
		Fi	rm/Company						
	80 SW 8th STR	EET, SUITE 2000							
			Address						
	MIAMI, FL 33	130							
		City/St	ate and Zip Code						
	bdrummond@dru	ımmondadvisərs.com							
		E-mail address: (to be used	l for future annual	report not	ification)				
For fu	rther information concerning	g this matter, please call:							
	BRUNO DRUMMOND		781	770-00	05				
	Name o	f Contact Person	Area Code	Day	time Telephone Number				
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301				
Enclos	sed is a check for the follow \$125.00 Filing Fee	ing amount: \$\Bigcup \text{\$\Sigma}\$ \$130.00 \text{Filing Fee & Certificate of Status}\$	□ \$155.00 Filir Certified Copy		☐ \$160.00 Fiting Fee, Co of Status & Certified Cop				

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

IN COMPLIANCE WITH SECTION 6050002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

l.	NTICIA DO VALE LTDA LLC eign Limited Liability Company; must inclu	de "Limited Liabili	ty Company, ************************************	" or "LL	('.")	
Liability Company," "L.L.C,	Iternate name adopted for the purpose of training mLLC.")	nsacting business u	n Florida. The alterna	te name m	ust includ	le "Limited
2. BRAZIL	3.	98-1269380				
company is organized)	of which foreign limited liability		(FEI number, if appli	icable)		
1. 11/01/2015						
	(Date first transacted business in FI (See sections 605,0904 & 605,0905, I	lorida, il prior to re F.S. to determine p	gistration.) enalty liability)			
601 BRICKELL KEY					٠.	•
MIAMI, FL 33131				}	2915 KOV	entra (العمدة عليه العمدة عليه ا
	(Street Address of Principa	al Office)			25	
601 BRICKELL KEY	DRIVE, SUITE 901			500 mi	1	10:24:2 <u>4:14</u> 1
MIAMI, FL 33131				SEE	ယ်	energy Statement
	(Mailing Address	5)		<u> </u>	U	
. Name and street addres	ss of Florida registered agent; (P.O. Bo)	x NOT acceptab	le)	사이	*****	Care V
Name:	DRUMMOND CONSULTING LLC		,	AGE AGE	ري س	
Office Address:	80 SW 8th STREET, SUITE 2000					
	MIAMI		Florida 33130			
	(City)	*	(Zip cod	le)		
lesignated in this applica o complywith the provisi	egistered agent and to accept service of ation, I hereby accept the appointment of ions of all statutes relative to the proper my position as registered agent. Rumo (Rystered agent)	us registered age. and complete po	nt and agree to act erformance of my o	in this co	inucity.	I further agree
	(Registered ag	ent's signature)				
	acity and address of the person(s) who h A TAVARES DE MELO, MANACER	as/have authority	to manage is/are:			
	JCENA/PB - BRAZIL - ZIP 58,315-000	00			· · · · · · · · · · · · · · · · · · ·	
	✓ 、			· · · · · · · · · · · · · · · · · · ·		
O. Attached is a certificate urisdiction under the law of the translator must be s	of existence, no more than 90 flaxs old, of which it is organized. If the confine abmitted) Signature of an a	te is in a foreign	ed by the official hr language, a translat	iving cust	ody of receiving	ecords in the are under oath
This document is executed	Signature of an Al		tutes. Lam aware th	อบอยบริส	ge interr	nation
	o the Department of State constitutes a il	iird degree felony				- 000 a d 10° 7 E
	FREDERICO OLIVEIRA TAVARES	DE MELO				

Typed or printed name of signee



Page 1 of 1

TRANSLATION

(LOGO)

Federal Revenue

Proof of Enrollment and Registration Status

Tax Paver.

Verify the identification data for the legal entity and, if there's any divergences, provide to RFB* your updated Registration.

(LOGO)

FEDERATIVE REPUBLIC OF BRAZIL NATIONAL REGISTRATION OF JURIDIC PERSONS PROOF OF ENROLLMENT AND REGISTRATION STATUS

ENROLLMENT NUMBER 04.833.180/0001-43 HEAD OFFICE

STARTING DATE 12/07/2001

CORPORATE NAME

INDUSTRIA ALIMENTICIA DO VALE LTDA.

TITLE OF THE STABLISHMENT (INVENTED NAME)

CODE AND DESCRIPTION OF THE MAIN ECONOMIC ACTIVITY

10.69-4-00 - Manufacturing and grinding of vegetal products not previously specified

CODE AND DESCRIPTION OF SECONDARY ECONOMIC ACTIVITIES

46.39-7-02 - Wholesale trade of general food products, with associated fractionating and packaging activities 01.33-4-05 - Coco-da-baia farming

CODE AND DESCRIPTION OF THE JURIDICAL NATURE 206-2 - Private Limited Company

ADDRESS

ROD PB 25, KM 18

ZIP CODE 58.315-000

ELETRONIC ADDRESS

NUMBER

BURROUGH/DISTRICT RURAL ZONE

COMPLEMENT

CITY LUCENA

STATE PB

TELEPHONE

(83) 3228-3536 / (81) 2121-9900

OFFICIAL FEDERATIVE ENTITY (EFR)

REGISTRATION STATUS

ACTIVE

MUTIVE OF REGISTRATION STATUS SPECIAL STATUS

DATE OF REGISTRATION STATUS 08/27/2005

DATA OF SPECIAL STATUS

CERTIFICATION

I, Jose M. de Aguiar, hereby certify, under the penalties of perjury, that I am fluent in English and Portuguese and that I am competent to perform the present translation. Therefore, I have, to the best of my knowledge and belief, made an accurate, true and complete translation from Portuguese to English of the preceding document, which is: Proof of Registration Status of INDUSTRIA ALIMENTICIA DO VALE LTDA.

M Ge Muiar - Translator

On this 7th day of October of 2015, before me, the undersigned notary public, appeared Jose M de Aguiar, personally known to me, who signed the preceding or attached document in my presence, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his knowledge and belief.

> Julio CR Luz -Bilingual Notary Public My Commission expires on 08/21/2020

