

To: 850-617-6383

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : TAXLEAF.COM INC
Account Number : I20140000084
Phone : (305) 541-3980
Fax Number : (305) 541-7033

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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Foreign Limited Liability Company
PANNA COTTA LLC

Certificate of Status	0
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Estimated Charge	\$125.00

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FEB 01 2016

H16000025017 3**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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

PANNA COTTA LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. STATE OF DELAWARE 3. 46-3493603
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

5. 1549 NE 123RD ST
NORTH MIAMI, FL 33161
(Street Address of Principal Office)

6. 1549 NE 123RD ST
NORTH MIAMI, FL 33161
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: ACCOUNTANT & MANAGEMENT INC
Office Address: 1549 NE 123RD ST
NORTH MIAMI, Florida 33161
(City) (Zip code)

Registered agent's acceptance:

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 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)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

RENATO ABRAHAO - MEMBER - 1549 NE 123RD ST NORTH MIAMI, FL 33161

CASSIA DE ANDRADE SALDANHA - MEMBER - 1549 NE 123RD ST NORTH MIAMI, FL 33161

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. 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.

RENATO ABRAHAO
Typed or printed name of signer

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FILED
2016 JAN 29 A 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Delaware

The First State

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**I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT "CLAIRE LLC" HAS FILED THE
FOLLOWING DOCUMENTS:**

**CERTIFICATE OF FORMATION, FILED THE TWENTY-THIRD DAY OF APRIL,
A.D. 2014, AT 5:17 O'CLOCK P.M.**

**CERTIFICATE OF RESIGNATION OF APPOINTMENT, FILED THE NINETEENTH
DAY OF NOVEMBER, A.D. 2015, AT 5:28 O'CLOCK P.M.**

**AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID
CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE
AFORESAID LIMITED LIABILITY COMPANY, "CLAIRE LLC".**

**AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE
BEEN FILED TO DATE.**

**AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
NOT BEEN ASSESSED TO DATE.**



5522049 8340

SR# 20160428216

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 201740942

Date: 01-27-16

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