## M1800006445

(Re	equestor's Name)	
(Ac	Idress)	_
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(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
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SLUMBING PARTY FIRMS



## **COVER LETTER**

Registration Section Division of Corporations

'TO:

SUBJECT:	SUPERSMART Name o	USA, LLC of Limited Liability Company		
The enclosed "Applica Existence, and check a	tion by Foreign Limited Liability Cor re submitted to register the above refe	mpany for Authorization to Tracerenced foreign limited liabilit	ansact Business in Florida," Certificate o y company to transact business in Florida	f a.
Please return all corres	pondence concerning this matter to the	ne following:		
	Lauren Col	Name of Person		
	e-Councill			
	7050 W P	almetto Pau	le Rd #15-37	2
	BOCA RATO	N FL State and Zip Code	33433_	
	Laurene	SA COMA	tification)	
For further information	concerning this matter, please call:			
_ha	Name of Contact Person	at (954) 9/0 Area Code Day	1-3914 time Telephone Number	
MAILING A Division of Co Registration S P.O. Box 632 Tallahassee, F	orporations ection 7	Division Registrat Clifton E 2661 Exc	r ADDRESS: of Corporations ion Section Building ecutive Center Circle see, FL 32301	
Enclosed is a check for	~ <i>/</i>		<b>-</b>	
□ \$125.00 Fi	ing Fee D\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	



May 15, 2018

LAUREN COHEN 7050 W PALMETTO PARK RD #15-322 BOCA RATON, FL 33433 US

SUBJECT: SUPERSMART USA, LLC

Ref. Number: W18000045775

We have received your document for SUPERSMART USA, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Please return the corrected original and one copy of 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.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 518A00010046

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

IS COMBILIANCE WITH SECTION OF OAL FLORIDA STAILTEN, THE FOLLOWERG IS SERVIDTED TO RECISIER A FORENCE LIMITED FLARILITY COMPANY TO TRANSACT BENNELSS IN THE STATE OF FLORIDA:
1. SUPERSMART USA, LLC. (Name of forming Limited Liability) company, must be traded Liability Longrapy, Title of the control o
(Name of Freeign Limsted Linkshiry Company); missi include "Limbeley Lompany," "T 1 C," or "12 C ")
[Harris consistent complete the part for the purpose of the transport constructing the construction of the
Consideration and the forming because between company or occurred.  (2) author, it apple above
1 NIA
5. Ch. W. Flacile St. H 918 6. 50 Me.
S. Ch. W. J. Ac. et 31 1 F 118 6. Och M.
MIUMI FL 33170
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box. <u>NOT acceptable)</u>
Name: e- (ound) Inc. (om
Office Address: 7050 W. Palmette Paule Rd #15-322
BOCA RELOO Horida 33435
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 resigned agent.
(Reported agric's assubant)
8. The name, title or capacity and address of the person(s) who has have authority to manage (Vare.
Title or Capacity: Name and Address: Title or Capacity: Name and Address:
Benjamin Serra
— 66 W Flagler #918
(Geo attachments it necessary)
9. Attached is a remificate of existence, no more than 90 days old, duly authenticated by the official basing custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a manslation of the certificate under exilit.
of the transfator must be submitted)
10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any take information. Submitted in a document to the Department of State constitutes a writing design relong as provided for in 5,817,155, 17.8.
highest of the subbrasted per
Benzamin Serra

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "SUPERSMART USA, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE FOURTH DAY OF AUGUST, A.D. 2017, AT 4:16 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUPERSMART USA, LLC" WAS FORMED ON THE FOURTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 202935767

Date: 06-21-18