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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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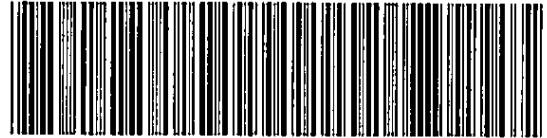
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 JAN -7 AM 8:24

FILED

V HERRING
JAN 7 - 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2018

SEBEASTIAN GEREAU
SURGI SHOP
19309 GARDEN QUILT CIRCLE
LUTZ, FL 33558

SUBJECT: ASSET SURPLUS REALLOCATION
Ref. Number: W18000104061

We have received your document for ASSET SURPLUS REALLOCATION and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable.

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 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) 245-6050.

Valerie Herring
Regulatory Specialist III

Letter Number: 418A00024568

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Asset Surplus Reallocation Limited Liability Company

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:

Sebastian Gereau

Name of Person

Surgi Shop

Firm/Company

19309 Garden Quilt Circle

Address

Lutz, Florida 33558

City/State and Zip Code

contact@surgishop.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicholas Derian

818

406 4443

at ()

Name of Contact 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

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ASSET SURPLUS REALLOCATION UC

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

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

3. 82-4378183

(EIN number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration)
(See sections 605.004 & 605.0405, F.S. to determine penalty liability)

5. 1541 N Rodney Dr 2nd Floor

(Street Address of Principal Office)

Los Angeles CA, 90027

6. 1541 N Rodney Dr 2nd Floor

(Mailing Address)

Los Angeles CA, 90027

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Sebastian Mora Gereau

Office Address: 19309 Garden Quilt Circle

Lutz

Florida 33558

(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.

Sebastian Mora Gereau
(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

CEO

Cassio Barbosa

1541 N Rodney Dr.
Los Angeles, CA 90027

COO

Nicholas Derian

1541 N Rodney Dr.
Los Angeles, CA 90027

(Use attachments if necessary)

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)

10. 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.

[Signature]
(Signature of an authorized person)

2019 JAN -7 AM 8:24
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: ASSET SURPLUS REALLOCATION LLC

FILE NUMBER: 201803810038
FORMATION DATE: 02/06/2018
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 21, 2018.

ALEX PADILLA
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 JAN -7 AM 8:24

FILED