

M 19000005997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

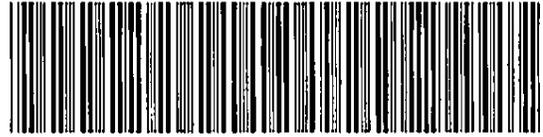
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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3458 Lakeshore Drive, Tallahassee, FL 32312
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Date: 6/19/2019
 Acc#120160000072

W: [Signature]

Name:	SELVATRA LLC
Document #:	
Order #:	11838259

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Amount: \$ 125.00

Thank you!

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. SELVATRA LLC
(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.")

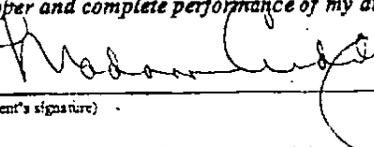
2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 603.0904 & 603.0903, F.S. to determine penalty liability)

5. 801 BRICKELL AVENUE 6. 801 BRICKELL AVENUE
(Street Address of Principal Office) (Mailing Address)
SUITE 1090 SUITE 1090
MIAMI, FL 33131 MIAMI, FL 33131

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: NRAI Services, Inc.
 Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

By: NRAI Services, Inc.  **Madonna Cuddihy**
(Registered agent's signature) Assistant Secretary

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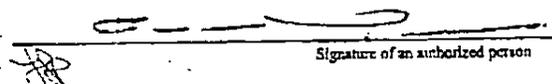
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Vince Business Corp.</u> <small>Ocean Business Plaza, Torre Banesco, Ofc 1011 Ciudad de Panama, Rep. de Panama</small>	<u>President</u>	<u>Eduardo Pacheco</u> <small>Ocean Business Plaza, Torre Banesco, Ofc 1011 Ciudad de Panama, Rep. de Panama</small>
<u>Gen. Manager/Secretary</u>	<u>Felipe Jaramillo</u> <small>Ocean Business Plaza, Torre Banesco, Ofc 1011 Ciudad de Panama, Rep. de Panama</small>	<u>Treasurer:</u>	<u>Jaine Santos</u> <small>Ocean Business Plaza, Torre Banesco, Ofc 1011 Ciudad de Panama, Rep. de Panama</small>

(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 of an authorized person
Eduardo Pacheco, President
Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SELVATRA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF JUNE, A.D. 2019.

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

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TALLAHASSEE, FLORIDA



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


Jeffrey W. Bullock, Secretary of State

Authentication: 203051176

Date: 06-18-19