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(Bt	usiness Entity Nan	ne)
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■ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

TO: Registration Section **Division of Corporations** K & M WAXING CENTER LLC SUBJECT: 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: Farley Alves Name of Person A Plus Tax Solutions LLC Firm/Company 14 Clark Street, Unit B Address Danbury, CT 06810 City/State and Zip Code aplustaxsolutionsusa@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Farley Alves Daytime Telephone Number Name of Contact Person Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount:

☐ \$155.00 Filing Fee &

Certified Copy

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &

Certificate of Status

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 K & M WAXING CEN				
(Name of Foreign	Limited Liability Company; must include "Limite	ed Liability	y Company," "L.L.C.," or "LLC."	
				
(If name unavailable, enter alternate i	name adopted for the purpose of transacting business in E	lorida The	alternate name must include "Limited	Liability Company," "L.L.C," or "LLC")
Connecticut 2.		3	47-3329060	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	٥.	(FEI nu	mber, if applicable)
N/A				
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration	B.)	
	(See Sections 603,0904 & 803 0905, F.S. to determ	nue benalty		
K & M WAXING CE		6.	K & M WAXING CENTI	ER LLC
5. (Street Address of Principal Office)		0.	(Mailing Address)	
9735 Old St.Augustine	Road, Unit 8		261 Maplewood Drive	
Jacksonville, FL 3225	7		Saint John, FL 32259	
7. Name and street address	ss of Florida registered agent: (P.O. Box	x <u>NOT</u> :	acceptable)	21 Ju
Name:	Marlene G. Vieira			
Office Address:	261 Maplewood Drive			문의 로 ㅁ 응답 &
	Saint John	<u>.</u>	32259 Florida	56
	(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.

maelen G ViciVa
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Marlene G. Vieira	□Manager	Name: Keila R Miranda
■Member	Address: 261 Maplewood Drive	■Member	Address: 11 East Pearl Street
□Authorized	Saint John, FL 32259	□Authorized	Danbury, CT 06810
Person		Person	
□Other		□Other	Other
□Manager	Name: Marcelo Vieira	□Manager	Name:
■Member	Address: 261 Maplewood Drive	□Member	Address:
□Authorized	Saint John, FL 32259	□Authorized	
Person		Person	
□Other	Other	Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	□Other	□Other	

<u>Important Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.

Marlene G Vicira

Signature of an authorized person

Fyped or printed name of signee

Secretary of the State of Connecticut Certificate of Legal Existence

Standard Certificate

Date Issued: June 24, 2021

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

Business Details

Business Name	K & M WAXING CENTER LLC	
Business ALEI	US-CT.BER:1170426	
Formation Date	03/10/2015	

Secretary of the State

Business ALEI: US-CT.BER:1170426 Certificate Number: C-00000700

Note: To verify this certificate, visit http://www.business.ct.gov