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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BREATHING EMOTIONS LLC.  
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:

**MR. STEFANO IANNINI**

\_\_\_\_\_  
Name of Person

**BREATHING EMOTIONS LLC.**

\_\_\_\_\_  
Firm/Company

**138 S Cypress RD, apt 228**

\_\_\_\_\_  
Address

**Pompano Beach, FLORIDA, 33060**

\_\_\_\_\_  
City/State and Zip Code

**SIANNINI@THEAROMATRACE.COM**

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

For further information concerning this matter, please call:

**STEFANO IANNINI**

+1

**954 599 9870**

\_\_\_\_\_  
at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

BREATHING EMOTIONS LLC.

1. \_\_\_\_\_  
(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  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_  
(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. \_\_\_\_\_  
138 S Cypress Road, apt 228,  
Pompano Beach, FL 33060  
(Street Address of Principal Office)

6. \_\_\_\_\_  
138 S Cypress Road, apt 228,  
Pompano Beach, FL 33060  
(Mailing Address)

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

Name: \_\_\_\_\_  
STEFANO IANNINI

Office Address: \_\_\_\_\_  
138 S Cypress Road, apt 228,  
Pompano Beach, FL 33060

\_\_\_\_\_ Pompano Beach \_\_\_\_\_ 33060  
(City) Florida (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)

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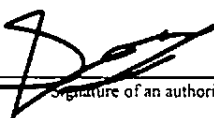
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager X	Name: <u>STEFANO IANNINI</u>	<input type="checkbox"/> Manager	Name: _____				
<input type="checkbox"/> Member	Address: <u>138 S Cypress Road, apt 228, Pompano Beach, FL 33060</u>	<input type="checkbox"/> Member	Address: _____				
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____				
Person	_____	Person	_____				
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____				
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____				
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____				
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____				
Person	_____	Person	_____				
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____				
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____				
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____				
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____				
Person	_____	Person	_____				
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____				

Important Notice: 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.

  
\_\_\_\_\_  
Signature of an authorized person

STEFANO IANNINI

\_\_\_\_\_  
Typed or printed name of signee

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BREATHING EMOTIONS 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 FOURTEENTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREATHING EMOTIONS LLC" WAS FORMED ON THE FOURTH DAY OF JANUARY, A.D. 2022.

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



6561937 8300

SR# 20241013773

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 203028822

Date: 03-14-24

**RESOLUTIONS OF THE MEMBERS  
OF  
BREATHING EMOTIONS LLC**

THE UNDERSIGNED, being all the Members of BREATHING EMOTIONS LLC (the "Company") hereby waive all formal requirements, including the necessity of holding a formal or informal meeting, and any requirements for notice and hereby consent in writing to the adoption of the following resolution, taking such action in lieu of a Special Meeting of Members:

1. It is hereby resolved that Maximiliano G. Iannini, who is currently serving as Manager for the Company, shall, effective immediately, be relieved of his duties and shall no longer act as Manager or in any capacity for the Company.
2. It is hereby further resolved that, effective immediately, Stefano Iannini shall become the new Manager for the Company, with all the powers, responsibilities, and obligations of said position as detailed in the Company's Operating Agreement.

This action contained herein shall be effective as of the 14<sup>th</sup> day of March 2024.

IN WITNESS WHEREOF, the undersigned, being all the Members of the Company, have hereunto set their hands and seals for the purposes herein expressed.

DATED: The 14<sup>th</sup> day of March 2024.

Member:  
Aroma Innovation Holding Ltd.,  
A Belizean Company



Maximiliano G. Iannini, Director



Stefano Iannini - Member