9/9/24, 1:23 PM Division of Corporations

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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : DOSSANTOS AND MACHADO,LLC
Account Number : I20140000089
Phone : (754)301-2128
Fax Number : (954)252-4650

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: INFO@GFSTAXACCT.COM

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TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
DE PAULA RODRIGUES FL LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	$130.00

2024 SEP -9 PM 4:26

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DE PAULA RODRIGUES 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:

JULIANA MACHADO, CPA
Name of Person

GFS TAX & ACCOUNTING SERVICES
Firm/Company

11764 W SAMPLE RD - STE 102
Address

CORAL SPRINGS, FL 33065
City/State and Zip Code

INFO@GFSTAXACCT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIANA MACHADO at (754) 301-2128
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

(((H24000306628 3)))

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. DE PAULA RODRIGUES LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," [illegible])

2. DE PAULA RODRIGUES FL LLC
[illegible]

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

4. [illegible]
(FEI number, if applicable)

5. 09/09/2024
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

6. 20335 W COUNTRY CLUB DR, STE 1809
Miami FL 33180
(Street address of principal office)

7. 11764 W SAMPLE RD - STE 102
CORAL SPRINGS FL 33065
(Mailing address)

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

Name: GFS TAX & ACCOUNTING SERVICES

Office Address: 11764 W SAMPLE RD STE 102

CORAL SPRINGS, Florida 33065
(City) (Zip code)

2024 SEP -9 PM 4:26

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.

Juliana Machado
(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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
☐ Manager	Name: CONSTANTINO RODRIGUES	■ Manager	Name: KENEDY G DE MELO
■ Member	Address: 20335W COUNTRY CLUB DR	☐ Member	Address: 10826 OCEANO WAY
☐ Authorized	STE 1809	☐ Authorized	PARKLAND, FL 33076
Person	Miami, FL 33180	Person	
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name:	☐ Manager	Name:
☐ Member	Address:	☐ Member	Address:
☐ Authorized		☐ Authorized	
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name:	☐ Manager	Name:
☐ Member	Address:	☐ Member	Address:
☐ Authorized		☐ Authorized	
Person		Person	
☐ Other	☐ Other	☐ Other	☐ 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.

Kenedy De Melo

Signature of an authorized person

KENEDY G DE MELO

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DE PAULA RODRIGUES, 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 TWENTY-EIGHTH DAY OF AUGUST, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DE PAULA RODRIGUES, LLC" WAS FORMED ON THE FIFTEENTH DAY OF JULY, A.D. 2014.

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

Jeffrey W. Bullock, Secretary of State

5568530 8300

SR# 20243540613

Authentication: 204264643

Date: 08-28-24

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