

M12 UUUUU 5958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

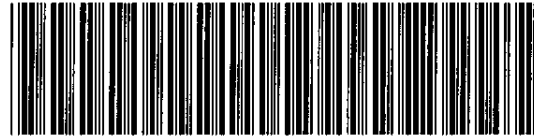
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Certified Copies _____ Certificates of Status _____

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B. KOHR
OCT 31 2012
EXAMINER



000240654190

10/29/12--01002--006 **160.00

FILED
12 OCT 23 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR
OCT 31 2012
EXAMINER

Michael Kaitila
c/o Vestisse Associates LLC
228 Park Ave South
Suite 91411
New York, NY 10003

Oct 22, 2012

Florida Department of State
Divisions of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
12 OCT 23 PM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ATTN: Mr. Buck Kohr

Dear Mr. Kohr,

Please find attached our foreign LLC request to transact business in Florida. Also, please find attached our check for \$160 made payable to FLORIDA DEPARTMENT OF STATE.

Please mail a copy of the acknowledgement letter to the address on the top of this cover letter.

Thank you for your time and consideration. If there are any problems with the application please don't hesitate to call me at 215-385-6892 or email at m.kaitila@gmail.com

Thanks again.

Best,


Michael Kaitila

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vestisse Associates 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:

Michael Kaitila

Name of Person

Vestisse Associates LLC

Firm/Company

228 Park Ave S, Suite 91411

Address

New York, NY 10003

City/State and Zip Code

m.kaitila@gmail.com

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

For further information concerning this matter, please call:

Michael Kaitila

Name of Person

at (215)

385-6892

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

12 OCT 2009
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Vestisse Associates 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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. State of Delaware

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

3. EIN: 46-1123565

(FEI number, if applicable)

4. Oct 4 2012

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 2711 Centerville Road, Suite 400

Wilmington, County of New Castle, 19808

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

Michael Kaitila, 228 Park Ave S, Suite 91411, New York, NY 10003

10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

Hospitality/Bar/Lounge


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

MICHAEL KAITILA

Typed or printed name of signee

FILED
12 OCT 23 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Vestisse Associates LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Michael Kaitila

(Name)

2750 NE 8th Street, Suite 330

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Homestead

FL 33033

City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

State of Delaware
Secretary of State
Division of Corporations
Delivered 09:59 AM 10/04/2012
FILED 08:27 AM 10/04/2012
SRV 121097881 - 5222690 FILE

CERTIFICATE OF FORMATION

OF

VESTISSE ASSOCIATES LLC

FIRST: The name of the limited liability company is
VESTISSE ASSOCIATES LLC

SECOND: Its registered office in the State of Delaware is to be located at 2711
Centerville Road, Suite 400, in the city of Wilmington, County of New Castle, 19808,
and its registered agent at such address is The Company Corporation.

THIRD: The Company will be managed by members, the names and street addresses of
those who are to serve until their first meeting of members or until their successors are
elected are:

Michael Kaitila
228 Park Ave. South Suite 91411 New York NY 10003

IN WITNESS WHEREOF, the undersigned, being the individual forming the Company,
has executed, signed and acknowledged this Certificate of Formation this 4th day of
October, 2012.

The Company Corporation,
Organizer

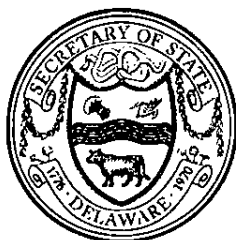
By: /s/ Margaret Rosado
Margaret Rosado
Assistant Secretary

Delaware

PAGE 1

The First State

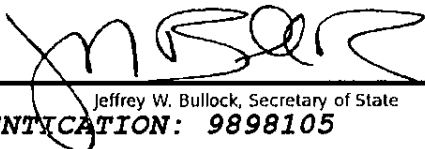
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VESTISSE ASSOCIATES LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF OCTOBER, A.D. 2012.



5222690 8300

121102804

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9898105

DATE: 10-05-12